

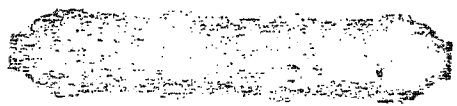
SECRET

Official Personnel Folder

SECRET

441100

RECEIVED



SECRET

REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

H a n d l e W i t h C a r e

SECRET

Ref. in 75

23 February 1977

Dear Mr. [REDACTED]

Enclosed is correspondence received in the Agency to be forwarded to you. Pursuant to the Privacy Act of 1974, we have made no response. In accordance with our policy, the request is mailed to you for any personal attention you wish to give it.

Sincerely,

[REDACTED]
Chief, Control Division

Dist.

Orig. - Adsp.

1 - TRS

1 - [REDACTED]

OP/TRS/PCS/GSmith:1(a)(23Feb77)

☐ UNCLASSIFIED

☐ INTERNAL
USE ONLY

☐ CONFIDENTIAL

☐ SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

EXTENSION

NO

DATE

5695

02/22/77

TO: (Officer designation, room number, and building)

DATE

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across columns after each comment.)

1.

OC/TRB

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

Enclosed is correspondence received in the Agency to be forwarded to you. Pursuant to the Privacy Act of 1974, we have made no response. In accordance with our policy, the request is mailed to you for any personal attention you wish to give it.

Sincerely,

410

☐ SECRET

☐ CONFIDENTIAL

☐ INTERNAL
USE ONLY

☐ UNCLASSIFIED

21 MAY 1975

Dear Mr. [REDACTED]

I am happy to send to you, under separate cover, your Agency Retirement Medallion. The Medallion is a tangible form of recognition and appreciation of your service to the Agency. It should serve as a lasting reminder of an honorable career, rewarding associations and the knowledge that you played your part in a vital activity.

Let me, therefore, add my congratulations and wish you the very best for the future.

Sincerely,

[REDACTED]
Director of Personnel

File - Mr. [redacted]
95-6755

21 APR 1975

[redacted]
Dear Mr. [redacted]

As you bring to a close your active career of service to your country, I join your friends and colleagues in wishing you well in your retirement.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I extend to you my sincere appreciation for the important work you have done.

Sincerely,

W. E. Colby

W. E. Colby
Director

Distribution:

0 - Addressee
1 - OPE

Originator: [redacted]

Director of Personnel

OP/RAD/ROH/ [redacted]

JAW/3287

(25 April 1975)

84 APR 1975

DL 48 23 MAY 75

NOTIFICATION OF PERSONNEL ACTION

ACP

1. SERIAL NUMBER 2. NAME (LAST FIRST MIDDLE)

3. NATURE OF PERSONNEL ACTION: RETIREMENT
(DISABILITY) UNDER CIA RETIREMENT
AND DISABILITY SYSTEM FROM PSL

4. EFFECTIVE DATE

MO DA YR
05 15 75

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

X

V TO V

V TO CP

CP TO V

CP TO CP

7. PAN AND ASCA

5232 1332

8. CK OR OTHER LEGAL AUTHORITY

PI 88-643 SECT 231

9. ORGANIZATIONAL DESIGNATIONS

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

OPS OFFICER

12. POSITION NUMBER

JCDP

13. SERVICE DESIGNATION

J-46

14. CLASSIFICATION SCHEDULE (S.E. 18, 24)

GS

15. OCCUPATION SERIES

0136.31

16. GRADE AND STEP

13 6

17. SALARY OR RATE

75451

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED																																																																																											
1. METAL NUMBER				2. NAME (Last-First-Middle)																																																																																											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED																																																																																											
RETIREMENT - DISABILITY - CIARDS FROM EXTENDED SICK LEAVE				05 14 75																																																																																											
5. PAY AND ASSA				6. CATEGORY OF EMPLOYMENT																																																																																											
5237-1392-0000				REGULAR																																																																																											
7. ORGANIZATIONAL DESIGNATION				8. LEGAL AUTHORITY (Complied by Office of Public Law 88-643, Section 231)																																																																																											
DDO/EA-DIVISION DEVELOPMENT COMPLEMENT				WASHINGTON, D.C.																																																																																											
9. POSITION TITLE				10. POSITION NUMBER																																																																																											
OPS OFFICER				DCOF																																																																																											
11. CLASSIFICATION SYMBOL (G.S. I.D. etc.)				12. CAREER SERVICE DESIGNATION																																																																																											
GS				CMG																																																																																											
13. OCCUPATIONAL SERIES				14. GRADE AND STEP																																																																																											
0136.01				13/6																																																																																											
15. SALARY OR RATE				16. REMARKS																																																																																											
\$ 25.451 ✓				LWD: 6 SEPTEMBER 1974 Co-ordinated with [] / ROB 22 May 1975. CMG/MSB [] ROB []																																																																																											
DATE SIGNED				DATE SIGNED																																																																																											
5/16/75				6/17/75																																																																																											
SPACE BELOW FOR EXCLUSIVE USE OF []																																																																																															
<table border="1"> <tr> <td>17. ACTION</td> <td>18. ACTION</td> <td>19. ACTION</td> <td>20. ACTION</td> <td>21. ACTION</td> <td>22. ACTION</td> </tr> <tr> <td>19. ACTION</td> <td>20. ACTION</td> <td>21. ACTION</td> <td>22. ACTION</td> <td>23. ACTION</td> <td>24. ACTION</td> </tr> <tr> <td>25. ACTION</td> <td>26. ACTION</td> <td>27. ACTION</td> <td>28. ACTION</td> <td>29. ACTION</td> <td>30. ACTION</td> </tr> <tr> <td>31. ACTION</td> <td>32. ACTION</td> <td>33. ACTION</td> <td>34. ACTION</td> <td>35. ACTION</td> <td>36. ACTION</td> </tr> <tr> <td>37. ACTION</td> <td>38. ACTION</td> <td>39. ACTION</td> <td>40. ACTION</td> <td>41. ACTION</td> <td>42. ACTION</td> </tr> <tr> <td>43. ACTION</td> <td>44. ACTION</td> <td>45. ACTION</td> <td>46. ACTION</td> <td>47. ACTION</td> <td>48. ACTION</td> </tr> <tr> <td>49. ACTION</td> <td>50. ACTION</td> <td>51. ACTION</td> <td>52. ACTION</td> <td>53. ACTION</td> <td>54. ACTION</td> </tr> <tr> <td>55. ACTION</td> <td>56. ACTION</td> <td>57. ACTION</td> <td>58. ACTION</td> <td>59. ACTION</td> <td>60. ACTION</td> </tr> <tr> <td>61. ACTION</td> <td>62. ACTION</td> <td>63. ACTION</td> <td>64. ACTION</td> <td>65. ACTION</td> <td>66. ACTION</td> </tr> <tr> <td>67. ACTION</td> <td>68. ACTION</td> <td>69. ACTION</td> <td>70. ACTION</td> <td>71. ACTION</td> <td>72. ACTION</td> </tr> <tr> <td>73. ACTION</td> <td>74. ACTION</td> <td>75. ACTION</td> <td>76. ACTION</td> <td>77. ACTION</td> <td>78. ACTION</td> </tr> <tr> <td>79. ACTION</td> <td>80. ACTION</td> <td>81. ACTION</td> <td>82. ACTION</td> <td>83. ACTION</td> <td>84. ACTION</td> </tr> <tr> <td>85. ACTION</td> <td>86. ACTION</td> <td>87. ACTION</td> <td>88. ACTION</td> <td>89. ACTION</td> <td>90. ACTION</td> </tr> <tr> <td>91. ACTION</td> <td>92. ACTION</td> <td>93. ACTION</td> <td>94. ACTION</td> <td>95. ACTION</td> <td>96. ACTION</td> </tr> <tr> <td>97. ACTION</td> <td>98. ACTION</td> <td>99. ACTION</td> <td>100. ACTION</td> <td></td> <td></td> </tr> </table>						17. ACTION	18. ACTION	19. ACTION	20. ACTION	21. ACTION	22. ACTION	19. ACTION	20. ACTION	21. ACTION	22. ACTION	23. ACTION	24. ACTION	25. ACTION	26. ACTION	27. ACTION	28. ACTION	29. ACTION	30. ACTION	31. ACTION	32. ACTION	33. ACTION	34. ACTION	35. ACTION	36. ACTION	37. ACTION	38. ACTION	39. ACTION	40. ACTION	41. ACTION	42. ACTION	43. ACTION	44. ACTION	45. ACTION	46. ACTION	47. ACTION	48. ACTION	49. ACTION	50. ACTION	51. ACTION	52. ACTION	53. ACTION	54. ACTION	55. ACTION	56. ACTION	57. ACTION	58. ACTION	59. ACTION	60. ACTION	61. ACTION	62. ACTION	63. ACTION	64. ACTION	65. ACTION	66. ACTION	67. ACTION	68. ACTION	69. ACTION	70. ACTION	71. ACTION	72. ACTION	73. ACTION	74. ACTION	75. ACTION	76. ACTION	77. ACTION	78. ACTION	79. ACTION	80. ACTION	81. ACTION	82. ACTION	83. ACTION	84. ACTION	85. ACTION	86. ACTION	87. ACTION	88. ACTION	89. ACTION	90. ACTION	91. ACTION	92. ACTION	93. ACTION	94. ACTION	95. ACTION	96. ACTION	97. ACTION	98. ACTION	99. ACTION	100. ACTION		
17. ACTION	18. ACTION	19. ACTION	20. ACTION	21. ACTION	22. ACTION																																																																																										
19. ACTION	20. ACTION	21. ACTION	22. ACTION	23. ACTION	24. ACTION																																																																																										
25. ACTION	26. ACTION	27. ACTION	28. ACTION	29. ACTION	30. ACTION																																																																																										
31. ACTION	32. ACTION	33. ACTION	34. ACTION	35. ACTION	36. ACTION																																																																																										
37. ACTION	38. ACTION	39. ACTION	40. ACTION	41. ACTION	42. ACTION																																																																																										
43. ACTION	44. ACTION	45. ACTION	46. ACTION	47. ACTION	48. ACTION																																																																																										
49. ACTION	50. ACTION	51. ACTION	52. ACTION	53. ACTION	54. ACTION																																																																																										
55. ACTION	56. ACTION	57. ACTION	58. ACTION	59. ACTION	60. ACTION																																																																																										
61. ACTION	62. ACTION	63. ACTION	64. ACTION	65. ACTION	66. ACTION																																																																																										
67. ACTION	68. ACTION	69. ACTION	70. ACTION	71. ACTION	72. ACTION																																																																																										
73. ACTION	74. ACTION	75. ACTION	76. ACTION	77. ACTION	78. ACTION																																																																																										
79. ACTION	80. ACTION	81. ACTION	82. ACTION	83. ACTION	84. ACTION																																																																																										
85. ACTION	86. ACTION	87. ACTION	88. ACTION	89. ACTION	90. ACTION																																																																																										
91. ACTION	92. ACTION	93. ACTION	94. ACTION	95. ACTION	96. ACTION																																																																																										
97. ACTION	98. ACTION	99. ACTION	100. ACTION																																																																																												

1132 1132 1132

SECRET

1132 1132 1132

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

3 September 1974

1. SERIAL NUMBER		2. NAME (Last-First-Middle)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
				Extended Sick Leave Pending Disability Retirement NTE: 14 MAY 75		MONTH DAY YEAR 09 08 74		Regular	
6. FUNDS		7. PAY AND NSCA		8. USUAL AUTHORITY (Completed by Office of Personnel)		9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
X V TO V O TO V		V TO O O TO O				5237-1392 0000		DDO/EA Division Development Complement	
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION		14. CLASSIFICATION SYMBOL (U.S. L.A. 66)		15. OCCUPATIONAL SERIES	
Ops Officer		9997		DMG		CS		0138.01	
16. GRADE AND STEP		17. SALARY OR RATE		18. REMARKS		19. DATE SIGNED		20. OFFICE	
13 0		24,122		LWD: 6 September 1974 Pending Disability Retirement Reassigned from DDO/EA Position 4408		6 Sept 74		CNG/MSD 12	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL 21. ACTION BY EMPLOY CODE 22. DATE OF ACTION 23. DATE OF GRACE 24. DATE OF LIT 25. DATE OF SEPARATION 26. DATE OF REENTRY 27. DATE OF REENTRY 28. DATE OF REENTRY 29. DATE OF REENTRY 30. DATE OF REENTRY 31. DATE OF REENTRY 32. DATE OF REENTRY 33. DATE OF REENTRY 34. DATE OF REENTRY 35. DATE OF REENTRY 36. DATE OF REENTRY 37. DATE OF REENTRY 38. DATE OF REENTRY 39. DATE OF REENTRY 40. DATE OF REENTRY 41. DATE OF REENTRY 42. DATE OF REENTRY 43. DATE OF REENTRY 44. DATE OF REENTRY 45. DATE OF REENTRY 46. DATE OF REENTRY 47. DATE OF REENTRY 48. DATE OF REENTRY 49. DATE OF REENTRY 50. DATE OF REENTRY 51. DATE OF REENTRY 52. DATE OF REENTRY 53. DATE OF REENTRY 54. DATE OF REENTRY 55. DATE OF REENTRY 56. DATE OF REENTRY 57. DATE OF REENTRY 58. DATE OF REENTRY 59. DATE OF REENTRY 60. DATE OF REENTRY 61. DATE OF REENTRY 62. DATE OF REENTRY 63. DATE OF REENTRY 64. DATE OF REENTRY 65. DATE OF REENTRY 66. DATE OF REENTRY 67. DATE OF REENTRY 68. DATE OF REENTRY 69. DATE OF REENTRY 70. DATE OF REENTRY 71. DATE OF REENTRY 72. DATE OF REENTRY 73. DATE OF REENTRY 74. DATE OF REENTRY 75. DATE OF REENTRY 76. DATE OF REENTRY 77. DATE OF REENTRY 78. DATE OF REENTRY 79. DATE OF REENTRY 80. DATE OF REENTRY 81. DATE OF REENTRY 82. DATE OF REENTRY 83. DATE OF REENTRY 84. DATE OF REENTRY 85. DATE OF REENTRY 86. DATE OF REENTRY 87. DATE OF REENTRY 88. DATE OF REENTRY 89. DATE OF REENTRY 90. DATE OF REENTRY 91. DATE OF REENTRY 92. DATE OF REENTRY 93. DATE OF REENTRY 94. DATE OF REENTRY 95. DATE OF REENTRY 96. DATE OF REENTRY 97. DATE OF REENTRY 98. DATE OF REENTRY 99. DATE OF REENTRY 100. DATE OF REENTRY									

SECRET

EXCLUDED BY P. 1102

EX 1

EX 2

40:

14-00000

SUMMARY OF AGENCY EMPLOYMENT

[REDACTED]

1955-1962: Economic Analyst - Conducted research and analysis including statistical studies of Sino-Soviet Bloc production of military equipment and related materials.

[REDACTED]

1963-1974: Intelligence Operations Officer - Served in various staff, supervisory and liaison capacities on U.S. and Asian area assignments. Was primarily concerned with the collection, evaluation and reporting of high priority intelligence of national interest including economic, political, social and military aspects of nations where assigned.

[REDACTED]

Supervised a staff [REDACTED]

[REDACTED] and provided guidance and assistance to colleagues involved in similar activities. At various times was responsible for the staffing, budgeting and management of major programs and projects.

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

9 September 1974

1. SERIAL NUMBER 2. NAME (Last-First-Middle)

3. NATURE OF PERSONNEL ACTION

Reassignment

4. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR

09 05 74

5. CATEGORY OF EMPLOYMENT

Regular

6. FUNDS

X

V TO V

V TO O

O TO V

O TO O

7. FAN AND NSCA

5237-1392 0000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

DDO/EA Division
Development Complement

10. LOCATION OF OFFICIAL STATION

Washington, D.C.

11. POSITION TITLE

Ops Officer

12. POSITION NUMBER

9997

13. CAREER SERVICE DESIGNATION

DMG

14. CLASSIFICATION SCHEDULE (GS, LP, etc.)

GS

15. OCCUPATIONAL SERIES

0136-01

16. GRADE AND STEP

13 6

17. SALARY OR RATE

24,122

18. REMARKS

HB:EA

Reassigned from: DDO/EA/JK/K Position #4408

Pending Disability Retirement

OTHER

19A. [Redacted]		DATE SIGNED		19B. [Redacted]		PROVING OFFICER		DATE SIGNED	
[Redacted]		09/10/74		[Redacted]		CMG/MID		11 Sep 74	
SPACE BELOW FOR EXCLUSIVE USE OF									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES	22. STATION CODE	23. INITIAL CODE	24. NOTES CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LET	
37 18		45M1EA	75013						
28. RET. EXPIRES	29. SPECIAL EMPLOYER	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. COLLECTION/CONTRIBUTION DATA		33. SECURITY RES. NO.	34. SEC		
35. PRIOR. PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FIELD/HEALTH INSURANCE		40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT.	43. FEDERAL TAX DATA	44. STATE TAX DATA						
45. POSITION CONTROL CERTIFICATION				46. OF APPROVAL			DATE APPROVED		
CM 9/10/74				[Redacted]			9/10/74		

FORM 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-0312

11-7

APPROV

ADMINISTRATIVE

6 SEP 1974

MEMORANDUM FOR : [REDACTED]

THROUGH

: Head of D Career Service

SUBJECT

: Notification of Approval of Disability Retirement

1. This is to inform you that the Director of Personnel has approved your request for disability retirement under the CIA Retirement and Disability System. On the basis of medical evidence, the Director of Personnel has determined that your disability is of a permanent nature; therefore, no further medical review of your case will be required.

2. Your retirement will become effective 14 May 1975, the expiration date of your accrued sick leave. You may be assured that every effort will be made to expedite delivery of your first check following completion of the administrative details required to effect your retirement.

[REDACTED]
Chief

Retirement Affairs Division

Distribution:

- 0 - Addressee
- 1 - D Career Service
- 1 - OMS
- 1 - CPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/ [REDACTED] jat/3257 (5 September 1974)

ADMINISTRATIVE
INTERNAL USE ONLY

2 JUL 1974

MEMORANDUM FOR : Chairman, Board of Medical Examiners

SUBJECT : Request for Medical Evaluation -
[REDACTED]

1. Subject, a participant in the CIA Retirement and Disability System, has applied for disability retirement under the provisions of Section 231 of Public Law 88-643, Central Intelligence Agency Retirement Act of 1964 for Certain Employees. It is requested that a medical examination be arranged for Subject and that a written report of the Board of Medical Examiners as prescribed in paragraph f.(4) of HR 20-50 be submitted to the Director of Personnel.
2. Attached are copies of the Supervisor's Statement and the Application for Disability Retirement. The Office of Personnel has been advised by the Office of Medical Services that a private physician's statement has been forwarded directly to them.
3. Mr. [REDACTED] will remain on duty pending a decision on his application for retirement.

[REDACTED]
Deputy Director of Personnel
for Special Programs

Attachments:

- a. Supervisor's Statement
- b. Application

Distribution:

- 0 & 1 - Addressee
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Folder

OP/RAD/ROB/[REDACTED]jat/3257 (28 June 1974)

ADMINISTRATIVE
INTERNAL USE ONLY

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)				3 JANUARY 1974	
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT				MONTH DAY YEAR 01 20 74		REGULAR	
6. FUNDS		7. FINANCIAL ANALYSIS NO. (CHARGEABLE)		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
X V TO V O TO V		V TO O O TO O		4237-1374-0000			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
DDO/EAST ASIA DIVISION				WASHINGTON, D.C.			
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
OPS OFFICER				1148 1400		D	
14. CLASSIFICATION SYMBOL (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0136.01		13 6		\$24,122	
18. REMARKS							
FROM: EA/PMI #4024							
DATE SIGNED				DATE SIGNED			
CFA/PERS 1/10/74				7 Jan 74			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. ADJUST.	25. DATE OF BIRTH	26. DATE OF GRADE
3710	4500	EA	7003				
27. DATE OF LEI	28. NTE CLARIFY	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA	32. CORRECTION/CANCELLATION DATA	33. SECURITY REQ. NO.	34. SEE
35. VET. PREFERENCE	36. SSV (COMP. DATE)	37. LWS (COMP. DATE)	38. EMPLOY CATEGORY	39. HEALTH INSURANCE	42. SOCIAL SECURITY NO.		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE			42. LEAVE CAT.	43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODES 1-NO PREVIOUS SERVICE 2-NO BASIS IN SERVICE 3-LEAVE IN SERVICE (LESS THAN 3 YEARS) 4-LEAVE IN SERVICE (MORE THAN 3 YEARS)			CODE	CODE 1-YES 2-NO		CODE 1-YES 2-NO	
45. POSITION CONTROL CERTIFICATION				46. CP APPROVAL		DATE APPROVED	
11483 1-8-74						1-9-74	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(4)

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

2 OCTOBER

1. SERIAL NUMBER		2. NAME (Last-First-Middle)		3. EFFECTIVE DATE REQUESTED		4. CATEGORY OF EMPLOYMENT	
				MONTH DAY YEAR 10 14 73		REGULAR	
5. FUNDS		6. FUND AND NSCA		7. LEGAL AUTHORITY (Completed by Office of Personnel)			
XX		4237-1374-0000					
8. ORGANIZATIONAL DESIGNATION				9. LOCATION OF OFFICIAL STATION			
DDO/EA DIVISION				WASH., D.C.			
10. POSITION TITLE				11. POSITION NUMBER		12. CAREER SERVICE DEMONSTRATION	
OPS OFFICER (D-13)				4024		D	
13. CLASSIFICATION SCHEDULE (GS, LB, etc.)		14. OCCUPATIONAL SERIES		15. GRADE AND STEP		16. SALARY OR RATE	
GS		0136.01		13 6A		24,122	
17. REMARKS				18. OTHER DATA			
FROM: DDO/EA/PMI/MS/#4939/MANILA, P.I.				22,945			

DATE SIGNED		DATE SIGNED	
10/2/73		10-4-73	
SPACES BELOW FOR EXCLUSIVE USE			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
10	10	45140 EA	7003
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LST	26. SECURITY REG. NO.
27. VET. PREFERENCE	28. SERV. COMP. DATE	29. LONG. COMP. DATE	30. CAREER CATEGORY
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE	32. LEAVE CAT. CODE	33. FEDERAL TAX DATA	34. STATE TAX DATA
45. POSITION CONTROL CERTIFICATION		46. DATE APPROVED	
104-78		982773	

FORM 8-72 1152

USE PREVIOUS EDITION

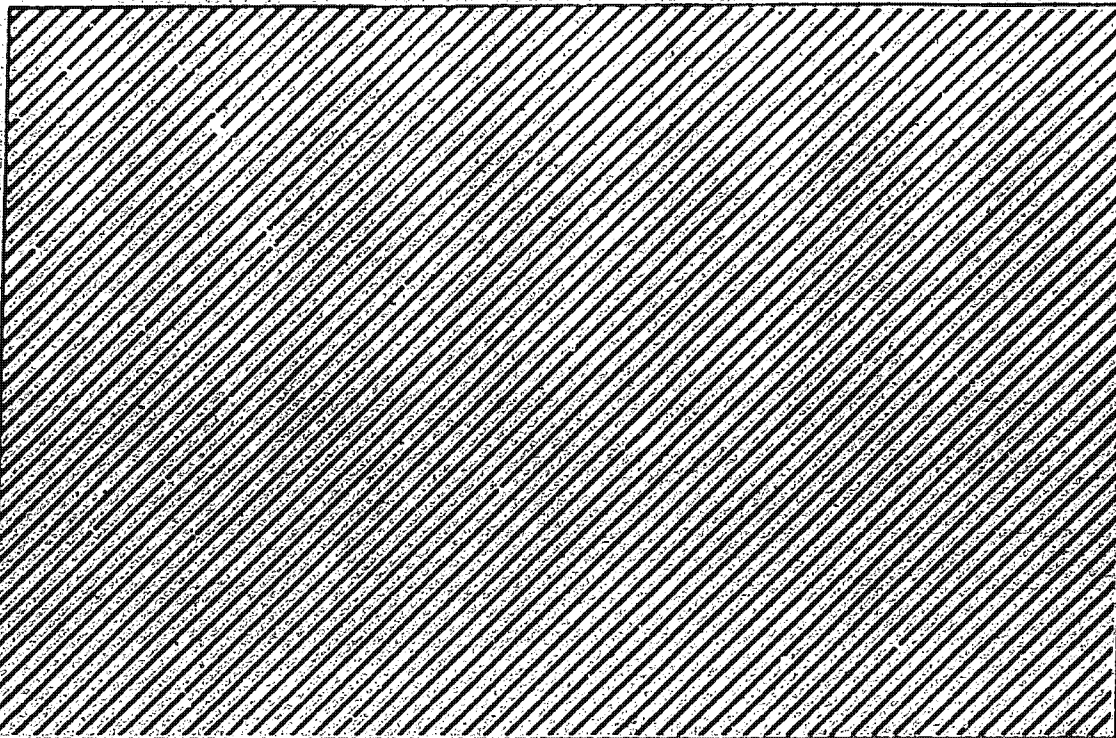

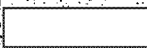
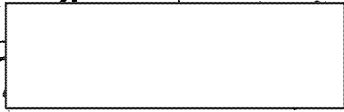
SECRET

CLASSIFIED BY 01-0332

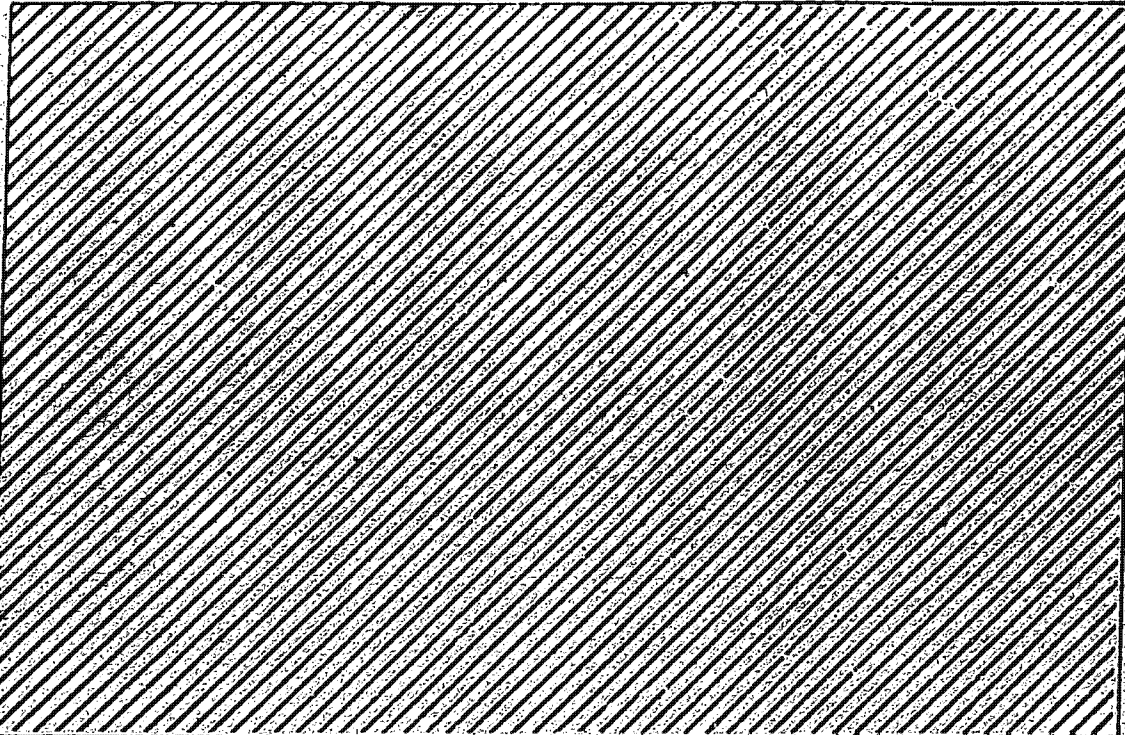
EX-2 / APCB

14

ADMINISTRATIVE - INTERNAL USE ONLY

		
NAME OF EMPLOYEE (Last-First-Middle) 	NAME AND RELATIONSHIP OF DEPENDENT* 	CLAIM NUMBER 74-0194
<p>There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>1 July 1973</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 11 Sept 1973	SIGNATURE OF DSD REPRESENTATIVE 	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
	Self	74-0096

There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 30 June 1973.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

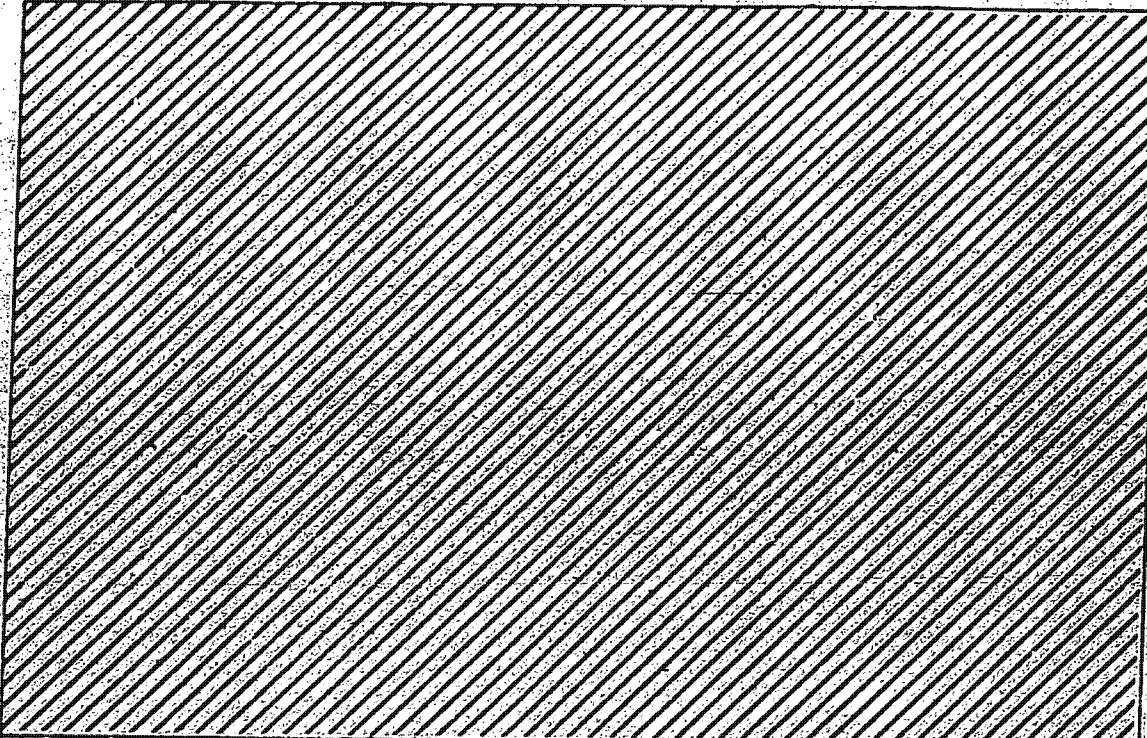
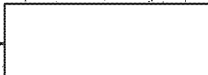
DATE OF NOTICE
27 August 1973

SIGNATURE OF BSO REPRESENTATIVE



NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle) 	NAME AND RELATIONSHIP OF DEPENDENT SELF	CLAIM NUMBER 72-0959
<p>There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>18 February 1972</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 9 May 72	SIGNATURE OF USG REPRESENTATIVE	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

1-21641

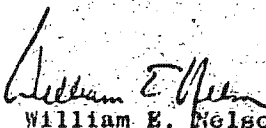
MEMORANDUM FOR: Deputy Director for Plans 20 Apr 71
THROUGH : Director of Personnel
SUBJECT : Departure Short of Tour and Home Leave -
[redacted]
REFERENCE : CSN 20-89, PERSONNEL, 16 April 1971

1. Paragraph four contains a recommendation for your approval.

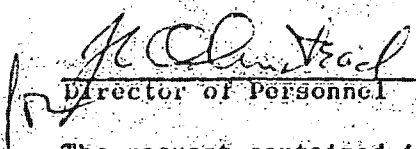
2. [redacted] is a GS-13 Operations Officer who has been assigned [redacted] since 20 May 1969. His current tour will end on 19 May 1971; his request for a second tour after home leave has been approved.

3. Mr. [redacted] wife has acrophobia and does not fly. In view of her condition she has been authorized round-trip travel by sea. The Division has authorized [redacted] and children to accompany her on the voyage [redacted] to the U. S.

4. [redacted] advises that the [redacted] can be accommodated on a ship scheduled to sail [redacted] on 3 May. In order to make the sailing, [redacted] would have to depart post before completion of his tour. The Far East Division recommends approval [redacted] short of tour for home leave.


William E. Nelson
Chief, Far East Division

CONCUR:


Director of Personnel

30 April 1971
Date

The request contained in Paragraph four is APPROVED:


Deputy Director for Plans

3 May 71
Date

SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. SERIAL NUMBER <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> 2. NAME (Last-First-Middle) <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> </div> <div style="width: 50%;"> 3. EFFECTIVE DATE REQUESTED <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-right: 5px;"></div> </div> </div> </div>						18 AUGUST 1970	
4. FUNDING <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; background-color: black; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> </div>				5. CATEGORY OF EMPLOYMENT REGULAR			
6. ASSIGNMENT V TO V C TO V X C TO C				7. FINANCIAL ANALYSIS NO. CHARGEABLE 1137-1639			
8. ORGANIZATIONAL DESIGNATIONS DDP/FE FOREIGN FIELD				9. LOCATION OF OFFICIAL STATION <div style="border: 1px solid black; width: 100px; height: 40px;"></div>			
10. POSITION TITLE OPS. OFFICER				11. POSITION NUMBER 4945			
12. CLASSIFICATION SCHEDULE (GS, IS, PW, ...) GS				13. OCCUPATIONAL SERIES 0136.01			
14. REMARKS FROM: NAME/4947				15. GRADE AND STEP 13 4			
16. SALARY OR RATE \$ 18,437.				17. CAREER SERVICE DESIGNATION D			
18. SIGNATURE <div style="border: 1px solid black; width: 100px; height: 40px;"></div>						19. DATE SIGNED 1 AUG 1970	
HOW FOR EXCLUSIVE USE							
20. ACTION CODE 37 10		21. OFFICE CODING 4544 FE		22. STATION CODE 57557			
23. DATE OF ACTION 3		24. DATE OF GRACE 		25. DATE OF LEI 			
26. SPECIAL REFERENCE 		27. RETIREMENT DATA 		28. SEPARATION DATA CODE 			
29. NET PREFERENCE 		30. SERV. COMP. DATE 		31. HEALTH INSURANCE 			
32. PREVIOUS CIVILIAN GOVERNMENT SERVICE 		33. LESSER CAT. CODE 		34. SOCIAL SECURITY NO. 			
35. POSITION LOCATION CERTIFICATION 		36. APPROVAL <div style="border: 1px solid black; width: 100px; height: 40px;"></div>		37. DATE APPROVED 08.21.70			

FORM 1152

PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)						18 AUGUST 1970			
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				MONTH DAY YEAR		REGULAR					
6. FUNDS		V TO V		V TO C		7. FINANCIAL ANALYSIS NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
C TO V		C TO C		1137-1639							
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DIR/TE FORN-FIELD											
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
OPS OFFICER				3-1A		B					
14. CLASSIFICATION SCHEDULE (GS, FS, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		13 A		\$ 18,437.			
18. REMARKS											
FROM: 3AUG/1970											
18A. SIGNATURE OF OFFICIAL REQUESTING ACTION											
DATE SIGNED 8 AUG 1970											
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER											
DATE SIGNED											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES	22. STATION CODE	23. INTEGRAL CODE	24. MONTHS CODE	25. DATE OF BIRTH	26. DATE OF BIRTH	27. DATE OF BIRTH	28. DATE OF BIRTH		
		NUMERIC ALPHABETIC				MO DA YR	MO DA YR	MO DA YR	MO DA YR		
29. DATE EXPIRES	30. SPECIAL REFERENCE	31. CITIZENSHIP DATA	32. SEPARATION DATA CODE	33. CORRECTION CANCELLATION DATA	34. SECURITY RES NO	35. SEE	EOD DATA				
MO DA YR		1-CIT 2-ALIEN 3-RES	CODE	TYPE	MO DA YR						
36. VET PREFERENCE	37. SERV COMP DATA	38. LOAN COMP DATA	39. CAREER CATEGORY	40. FEEL HEALTH INSURANCE	41. SOCIAL SECURITY NO						
CODE	MO DA YR	MO DA YR	CODE	CODE	CODE						
42. PREVIOUS CIVILIAN GOVERNMENT SERVICE			43. ALIEN CAT CODE	44. FEDERAL TAX DATA	45. STATE TAX DATA						
1-NO PREVIOUS SERVICE 2-NO FEEL IN SERVICE 3-FEEL IN SERVICE (LESS THAN 3 YEARS) 4-FEEL IN SERVICE (MORE THAN 3 YEARS)			CODE	CODE	CODE						
46. POSITION CONTROL CERTIFICATION			47. OF APPROVAL	48. DATE APPROVED							

FORM 1152 USE PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

14 April 1969

1. SPECIAL NUMBER		2. NAME (Last-First-Middle)		DATE PREPARED	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT		MONTH DAY YEAR 05 02 69		REGULAR	
6. POINTS		7. FINANCIAL ANALYSIS NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
V TO V O TO V		V TO O O TO O		9137-1639	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION			
DDP/FE FOREIGN FIELD					
11. POSITION CODE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
OFS. OFFICER		4947		D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP	
GS		0136.01		13 3	
17. SALARY OR RATE		15,360			
18. REMARKS					
FROM: DDP/FE PMI/ 4024					
X Home Base: FE					
<p style="text-align: center;">Security: CONFIDENTIAL CO/SSC-16-69 16-5-69</p>					
19. SIGNATURE OF REQUESTING OFFICER		DATE SIGNED		100. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
		29 APR 1969			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21. OFFICE (OWNS)	22. STATION CODE	23. INTERNAL CODE	24. REGIONS	25. DATE OF RICH	26. DATE OF GRAD
37 10 11-10-69	57557		3		
27. DATE OF RICH	28. DATE OF GRAD	29. DATE OF IN	30. DATE OF RICH	31. DATE OF GRAD	32. DATE OF IN
33. DATE OF RICH	34. DATE OF GRAD	35. DATE OF IN	36. DATE OF RICH	37. DATE OF GRAD	38. DATE OF IN
39. DATE OF RICH	40. DATE OF GRAD	41. DATE OF IN	42. DATE OF RICH	43. DATE OF GRAD	44. DATE OF IN
45. DATE OF RICH	46. DATE OF GRAD	47. DATE OF IN	48. DATE OF RICH	49. DATE OF GRAD	50. DATE OF IN
51. DATE OF RICH	52. DATE OF GRAD	53. DATE OF IN	54. DATE OF RICH	55. DATE OF GRAD	56. DATE OF IN
57. DATE OF RICH	58. DATE OF GRAD	59. DATE OF IN	60. DATE OF RICH	61. DATE OF GRAD	62. DATE OF IN
63. DATE OF RICH	64. DATE OF GRAD	65. DATE OF IN	66. DATE OF RICH	67. DATE OF GRAD	68. DATE OF IN
69. DATE OF RICH	70. DATE OF GRAD	71. DATE OF IN	72. DATE OF RICH	73. DATE OF GRAD	74. DATE OF IN
75. DATE OF RICH	76. DATE OF GRAD	77. DATE OF IN	78. DATE OF RICH	79. DATE OF GRAD	80. DATE OF IN
81. DATE OF RICH	82. DATE OF GRAD	83. DATE OF IN	84. DATE OF RICH	85. DATE OF GRAD	86. DATE OF IN
87. DATE OF RICH	88. DATE OF GRAD	89. DATE OF IN	90. DATE OF RICH	91. DATE OF GRAD	92. DATE OF IN
93. DATE OF RICH	94. DATE OF GRAD	95. DATE OF IN	96. DATE OF RICH	97. DATE OF GRAD	98. DATE OF IN
99. DATE OF RICH	100. DATE OF GRAD	101. DATE OF IN	102. DATE OF RICH	103. DATE OF GRAD	104. DATE OF IN
105. DATE OF RICH	106. DATE OF GRAD	107. DATE OF IN	108. DATE OF RICH	109. DATE OF GRAD	110. DATE OF IN
111. DATE OF RICH	112. DATE OF GRAD	113. DATE OF IN	114. DATE OF RICH	115. DATE OF GRAD	116. DATE OF IN
117. DATE OF RICH	118. DATE OF GRAD	119. DATE OF IN	120. DATE OF RICH	121. DATE OF GRAD	122. DATE OF IN
123. DATE OF RICH	124. DATE OF GRAD	125. DATE OF IN	126. DATE OF RICH	127. DATE OF GRAD	128. DATE OF IN
129. DATE OF RICH	130. DATE OF GRAD	131. DATE OF IN	132. DATE OF RICH	133. DATE OF GRAD	134. DATE OF IN
135. DATE OF RICH	136. DATE OF GRAD	137. DATE OF IN	138. DATE OF RICH	139. DATE OF GRAD	140. DATE OF IN
141. DATE OF RICH	142. DATE OF GRAD	143. DATE OF IN	144. DATE OF RICH	145. DATE OF GRAD	146. DATE OF IN
147. DATE OF RICH	148. DATE OF GRAD	149. DATE OF IN	150. DATE OF RICH	151. DATE OF GRAD	152. DATE OF IN
153. DATE OF RICH	154. DATE OF GRAD	155. DATE OF IN	156. DATE OF RICH	157. DATE OF GRAD	158. DATE OF IN
159. DATE OF RICH	160. DATE OF GRAD	161. DATE OF IN	162. DATE OF RICH	163. DATE OF GRAD	164. DATE OF IN
165. DATE OF RICH	166. DATE OF GRAD	167. DATE OF IN	168. DATE OF RICH	169. DATE OF GRAD	170. DATE OF IN
171. DATE OF RICH	172. DATE OF GRAD	173. DATE OF IN	174. DATE OF RICH	175. DATE OF GRAD	176. DATE OF IN
177. DATE OF RICH	178. DATE OF GRAD	179. DATE OF IN	180. DATE OF RICH	181. DATE OF GRAD	182. DATE OF IN
183. DATE OF RICH	184. DATE OF GRAD	185. DATE OF IN	186. DATE OF RICH	187. DATE OF GRAD	188. DATE OF IN
189. DATE OF RICH	190. DATE OF GRAD	191. DATE OF IN	192. DATE OF RICH	193. DATE OF GRAD	194. DATE OF IN
195. DATE OF RICH	196. DATE OF GRAD	197. DATE OF IN	198. DATE OF RICH	199. DATE OF GRAD	200. DATE OF IN

FORM 1152 USE PREVIOUS EDITIONS

SECRET

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				11 April 1969	
2. NAME (Last-First-Middle)					
3. PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
CONVERSION FROM FBR STATUS				MONTHS 04 06 69	
5. FINANCIAL ANALYSTS NO. CHARGEABLE				6. CATEGORY OF EMPLOYMENT	
8137-1373				REGULAR	
7. FINANCIAL ANALYSTS NO. CHARGEABLE				8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION	
DDP/PS FE/PHI -				WASHINGTON, D. C.	
11. POSITION TITLE				12. POSITION NUMBER	
OPS OFFICER (13)				4024	
13. OCCUPATIONAL SERIES				14. GRADE AND STEP	
0136.01				13 3	
15. SALARY OR RATE				16. REMARKS	
15,369				Wash, D.C. Vm Dev (FE)	
17. FROM: Same					
18. DATE SIGNED				19. DATE SIGNED	
4/10/69				4/10/69	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
20. ACTION CODE	21. OFFICE CODE	22. STATION CODE	23. INTEREST CODE	24. MOBILE CODE	25. DATE OF BIRTH
50 10	45146 FE	75013			
26. SPECIAL REFERENCE	27. RETIREMENT DATA	28. SEPARATION DATA CODE	29. COLLECTION	30. SECURITY REQ. NO.	31. SOCIAL SECURITY NO.
32. DATE OF ENTRY	33. DATE OF DEPARTURE	34. DATE OF ENTRY	35. DATE OF DEPARTURE	36. DATE OF ENTRY	37. DATE OF DEPARTURE
38. DATE OF ENTRY	39. DATE OF DEPARTURE	40. DATE OF ENTRY	41. DATE OF DEPARTURE	42. DATE OF ENTRY	43. DATE OF DEPARTURE
44. DATE OF ENTRY	45. DATE OF DEPARTURE	46. DATE OF ENTRY	47. DATE OF DEPARTURE	48. DATE OF ENTRY	49. DATE OF DEPARTURE
50. DATE OF ENTRY	51. DATE OF DEPARTURE	52. DATE OF ENTRY	53. DATE OF DEPARTURE	54. DATE OF ENTRY	55. DATE OF DEPARTURE
56. DATE OF ENTRY	57. DATE OF DEPARTURE	58. DATE OF ENTRY	59. DATE OF DEPARTURE	60. DATE OF ENTRY	61. DATE OF DEPARTURE
62. DATE OF ENTRY	63. DATE OF DEPARTURE	64. DATE OF ENTRY	65. DATE OF DEPARTURE	66. DATE OF ENTRY	67. DATE OF DEPARTURE
68. DATE OF ENTRY	69. DATE OF DEPARTURE	70. DATE OF ENTRY	71. DATE OF DEPARTURE	72. DATE OF ENTRY	73. DATE OF DEPARTURE
74. DATE OF ENTRY	75. DATE OF DEPARTURE	76. DATE OF ENTRY	77. DATE OF DEPARTURE	78. DATE OF ENTRY	79. DATE OF DEPARTURE
80. DATE OF ENTRY	81. DATE OF DEPARTURE	82. DATE OF ENTRY	83. DATE OF DEPARTURE	84. DATE OF ENTRY	85. DATE OF DEPARTURE
86. DATE OF ENTRY	87. DATE OF DEPARTURE	88. DATE OF ENTRY	89. DATE OF DEPARTURE	90. DATE OF ENTRY	91. DATE OF DEPARTURE
92. DATE OF ENTRY	93. DATE OF DEPARTURE	94. DATE OF ENTRY	95. DATE OF DEPARTURE	96. DATE OF ENTRY	97. DATE OF DEPARTURE
98. DATE OF ENTRY	99. DATE OF DEPARTURE	100. DATE OF ENTRY	101. DATE OF DEPARTURE	102. DATE OF ENTRY	103. DATE OF DEPARTURE
104. DATE OF ENTRY	105. DATE OF DEPARTURE	106. DATE OF ENTRY	107. DATE OF DEPARTURE	108. DATE OF ENTRY	109. DATE OF DEPARTURE
110. DATE OF ENTRY	111. DATE OF DEPARTURE	112. DATE OF ENTRY	113. DATE OF DEPARTURE	114. DATE OF ENTRY	115. DATE OF DEPARTURE
116. DATE OF ENTRY	117. DATE OF DEPARTURE	118. DATE OF ENTRY	119. DATE OF DEPARTURE	120. DATE OF ENTRY	121. DATE OF DEPARTURE
122. DATE OF ENTRY	123. DATE OF DEPARTURE	124. DATE OF ENTRY	125. DATE OF DEPARTURE	126. DATE OF ENTRY	127. DATE OF DEPARTURE
128. DATE OF ENTRY	129. DATE OF DEPARTURE	130. DATE OF ENTRY	131. DATE OF DEPARTURE	132. DATE OF ENTRY	133. DATE OF DEPARTURE
134. DATE OF ENTRY	135. DATE OF DEPARTURE	136. DATE OF ENTRY	137. DATE OF DEPARTURE	138. DATE OF ENTRY	139. DATE OF DEPARTURE
140. DATE OF ENTRY	141. DATE OF DEPARTURE	142. DATE OF ENTRY	143. DATE OF DEPARTURE	144. DATE OF ENTRY	145. DATE OF DEPARTURE
146. DATE OF ENTRY	147. DATE OF DEPARTURE	148. DATE OF ENTRY	149. DATE OF DEPARTURE	150. DATE OF ENTRY	151. DATE OF DEPARTURE
152. DATE OF ENTRY	153. DATE OF DEPARTURE	154. DATE OF ENTRY	155. DATE OF DEPARTURE	156. DATE OF ENTRY	157. DATE OF DEPARTURE
158. DATE OF ENTRY	159. DATE OF DEPARTURE	160. DATE OF ENTRY	161. DATE OF DEPARTURE	162. DATE OF ENTRY	163. DATE OF DEPARTURE
164. DATE OF ENTRY	165. DATE OF DEPARTURE	166. DATE OF ENTRY	167. DATE OF DEPARTURE	168. DATE OF ENTRY	169. DATE OF DEPARTURE
170. DATE OF ENTRY	171. DATE OF DEPARTURE	172. DATE OF ENTRY	173. DATE OF DEPARTURE	174. DATE OF ENTRY	175. DATE OF DEPARTURE
176. DATE OF ENTRY	177. DATE OF DEPARTURE	178. DATE OF ENTRY	179. DATE OF DEPARTURE	180. DATE OF ENTRY	181. DATE OF DEPARTURE
182. DATE OF ENTRY	183. DATE OF DEPARTURE	184. DATE OF ENTRY	185. DATE OF DEPARTURE	186. DATE OF ENTRY	187. DATE OF DEPARTURE
188. DATE OF ENTRY	189. DATE OF DEPARTURE	190. DATE OF ENTRY	191. DATE OF DEPARTURE	192. DATE OF ENTRY	193. DATE OF DEPARTURE
194. DATE OF ENTRY	195. DATE OF DEPARTURE	196. DATE OF ENTRY	197. DATE OF DEPARTURE	198. DATE OF ENTRY	199. DATE OF DEPARTURE
200. DATE OF ENTRY	201. DATE OF DEPARTURE	202. DATE OF ENTRY	203. DATE OF DEPARTURE	204. DATE OF ENTRY	205. DATE OF DEPARTURE
206. DATE OF ENTRY	207. DATE OF DEPARTURE	208. DATE OF ENTRY	209. DATE OF DEPARTURE	210. DATE OF ENTRY	211. DATE OF DEPARTURE
212. DATE OF ENTRY	213. DATE OF DEPARTURE	214. DATE OF ENTRY	215. DATE OF DEPARTURE	216. DATE OF ENTRY	217. DATE OF DEPARTURE
218. DATE OF ENTRY	219. DATE OF DEPARTURE	220. DATE OF ENTRY	221. DATE OF DEPARTURE	222. DATE OF ENTRY	223. DATE OF DEPARTURE
224. DATE OF ENTRY	225. DATE OF DEPARTURE	226. DATE OF ENTRY	227. DATE OF DEPARTURE	228. DATE OF ENTRY	229. DATE OF DEPARTURE
230. DATE OF ENTRY	231. DATE OF DEPARTURE	232. DATE OF ENTRY	233. DATE OF DEPARTURE	234. DATE OF ENTRY	235. DATE OF DEPARTURE
236. DATE OF ENTRY	237. DATE OF DEPARTURE	238. DATE OF ENTRY	239. DATE OF DEPARTURE	240. DATE OF ENTRY	241. DATE OF DEPARTURE
242. DATE OF ENTRY	243. DATE OF DEPARTURE	244. DATE OF ENTRY	245. DATE OF DEPARTURE	246. DATE OF ENTRY	247. DATE OF DEPARTURE
248. DATE OF ENTRY	249. DATE OF DEPARTURE	250. DATE OF ENTRY	251. DATE OF DEPARTURE	252. DATE OF ENTRY	253. DATE OF DEPARTURE
254. DATE OF ENTRY	255. DATE OF DEPARTURE	256. DATE OF ENTRY	257. DATE OF DEPARTURE	258. DATE OF ENTRY	259. DATE OF DEPARTURE
260. DATE OF ENTRY	261. DATE OF DEPARTURE	262. DATE OF ENTRY	263. DATE OF DEPARTURE	264. DATE OF ENTRY	265. DATE OF DEPARTURE
266. DATE OF ENTRY	267. DATE OF DEPARTURE	268. DATE OF ENTRY	269. DATE OF DEPARTURE	270. DATE OF ENTRY	271. DATE OF DEPARTURE
272. DATE OF ENTRY	273. DATE OF DEPARTURE	274. DATE OF ENTRY	275. DATE OF DEPARTURE	276. DATE OF ENTRY	277. DATE OF DEPARTURE
278. DATE OF ENTRY	279. DATE OF DEPARTURE	280. DATE OF ENTRY	281. DATE OF DEPARTURE	282. DATE OF ENTRY	283. DATE OF DEPARTURE
284. DATE OF ENTRY	285. DATE OF DEPARTURE	286. DATE OF ENTRY	287. DATE OF DEPARTURE	288. DATE OF ENTRY	289. DATE OF DEPARTURE
290. DATE OF ENTRY	291. DATE OF DEPARTURE	292. DATE OF ENTRY	293. DATE OF DEPARTURE	294. DATE OF ENTRY	295. DATE OF DEPARTURE
296. DATE OF ENTRY	297. DATE OF DEPARTURE	298. DATE OF ENTRY	299. DATE OF DEPARTURE	300. DATE OF ENTRY	301. DATE OF DEPARTURE
302. DATE OF ENTRY	303. DATE OF DEPARTURE	304. DATE OF ENTRY	305. DATE OF DEPARTURE	306. DATE OF ENTRY	307. DATE OF DEPARTURE
308. DATE OF ENTRY	309. DATE OF DEPARTURE	310. DATE OF ENTRY	311. DATE OF DEPARTURE	312. DATE OF ENTRY	313. DATE OF DEPARTURE
314. DATE OF ENTRY	315. DATE OF DEPARTURE	316. DATE OF ENTRY	317. DATE OF DEPARTURE	318. DATE OF ENTRY	319. DATE OF DEPARTURE
320. DATE OF ENTRY	321. DATE OF DEPARTURE	322. DATE OF ENTRY	323. DATE OF DEPARTURE	324. DATE OF ENTRY	325. DATE OF DEPARTURE
326. DATE OF ENTRY	327. DATE OF DEPARTURE	328. DATE OF ENTRY	329. DATE OF DEPARTURE	330. DATE OF ENTRY	331. DATE OF DEPARTURE
332. DATE OF ENTRY	333. DATE OF DEPARTURE	334. DATE OF ENTRY	335. DATE OF DEPARTURE	336. DATE OF ENTRY	337. DATE OF DEPARTURE
338. DATE OF ENTRY	339. DATE OF DEPARTURE	340. DATE OF ENTRY	341. DATE OF DEPARTURE	342. DATE OF ENTRY	343. DATE OF DEPARTURE
344. DATE OF ENTRY	345. DATE OF DEPARTURE	346. DATE OF ENTRY	347. DATE OF DEPARTURE	348. DATE OF ENTRY	349. DATE OF DEPARTURE
350. DATE OF ENTRY	351. DATE OF DEPARTURE	352. DATE OF ENTRY	353. DATE OF DEPARTURE	354. DATE OF ENTRY	355. DATE OF DEPARTURE
356. DATE OF ENTRY	357. DATE OF DEPARTURE	358. DATE OF ENTRY	359. DATE OF DEPARTURE	360. DATE OF ENTRY	361. DATE OF DEPARTURE
362. DATE OF ENTRY	363. DATE OF DEPARTURE	364. DATE OF ENTRY	365. DATE OF DEPARTURE	366. DATE OF ENTRY	367. DATE OF DEPARTURE
368. DATE OF ENTRY	369. DATE OF DEPARTURE	370. DATE OF ENTRY	371. DATE OF DEPARTURE	372. DATE OF ENTRY	373. DATE OF DEPARTURE
374. DATE OF ENTRY	375. DATE OF DEPARTURE	376. DATE OF ENTRY	377. DATE OF DEPARTURE	378. DATE OF ENTRY	379. DATE OF DEPARTURE
380. DATE OF ENTRY	381. DATE OF DEPARTURE	382. DATE OF ENTRY	383. DATE OF DEPARTURE	384. DATE OF ENTRY	385. DATE OF DEPARTURE
386. DATE OF ENTRY	387. DATE OF DEPARTURE	388. DATE OF ENTRY	389. DATE OF DEPARTURE	390. DATE OF ENTRY	391. DATE OF DEPARTURE
392. DATE OF ENTRY	393. DATE OF DEPARTURE	394. DATE OF ENTRY	395. DATE OF DEPARTURE	396. DATE OF ENTRY	397. DATE OF DEPARTURE
398. DATE OF ENTRY	399. DATE OF DEPARTURE	400. DATE OF ENTRY	401. DATE OF DEPARTURE	402. DATE OF ENTRY	403. DATE OF DEPARTURE
404. DATE OF ENTRY	405. DATE OF DEPARTURE	406. DATE OF ENTRY	407. DATE OF DEPARTURE	408. DATE OF ENTRY	409. DATE OF DEPARTURE
410. DATE OF ENTRY	411. DATE OF DEPARTURE	412. DATE OF ENTRY	413. DATE OF DEPARTURE	414. DATE OF ENTRY	415. DATE OF DEPARTURE
416. DATE OF ENTRY	417. DATE OF DEPARTURE	418. DATE OF ENTRY	419. DATE OF DEPARTURE	420. DATE OF ENTRY	421. DATE OF DEPARTURE
422. DATE OF ENTRY	423. DATE OF DEPARTURE	424. DATE OF ENTRY	425. DATE OF DEPARTURE	426. DATE OF ENTRY	427. DATE OF DEPARTURE
428. DATE OF ENTRY	429. DATE OF DEPARTURE	430. DATE OF ENTRY	431. DATE OF DEPARTURE	432. DATE OF ENTRY	433. DATE OF DEPARTURE
434. DATE OF ENTRY	435. DATE OF DEPARTURE	436. DATE OF ENTRY	437. DATE OF DEPARTURE	438. DATE OF ENTRY	439. DATE OF DEPARTURE
440. DATE OF ENTRY	441. DATE OF DEPARTURE	442. DATE OF ENTRY	443. DATE OF DEPARTURE	444. DATE OF ENTRY	445. DATE OF DEPARTURE
446. DATE OF ENTRY	447. DATE OF DEPARTURE	448. DATE OF ENTRY	449. DATE OF DEPARTURE	450. DATE OF ENTRY	451. DATE OF DEPARTURE
452. DATE OF ENTRY	453. DATE OF DEPARTURE	454. DATE OF ENTRY	455. DATE OF DEPARTURE	456. DATE OF ENTRY	457. DATE OF DEPARTURE
458. DATE OF ENTRY	459. DATE OF DEPARTURE	460. DATE OF ENTRY	461. DATE OF DEPARTURE	462. DATE OF ENTRY	463. DATE OF DEPARTURE
464. DATE OF ENTRY	465. DATE OF DEPARTURE	466. DATE OF ENTRY	467. DATE OF DEPARTURE	468. DATE OF ENTRY	469. DATE OF DEPARTURE
470. DATE OF ENTRY	471. DATE OF DEPARTURE	472. DATE OF ENTRY	473. DATE OF DEPARTURE	474. DATE OF ENTRY	475. DATE OF DEPARTURE
476. DATE OF ENTRY	477. DATE OF DEPARTURE	478. DATE OF ENTRY	479. DATE OF DEPARTURE	480. DATE OF ENTRY	481. DATE OF DEPARTURE
482. DATE OF ENTRY	483. DATE OF DEPARTURE	484. DATE OF ENTRY	485. DATE OF DEPARTURE	486. DATE OF ENTRY	487. DATE OF DEPARTURE
488. DATE OF ENTRY	489. DATE OF DEPARTURE	490. DATE OF ENTRY	491. DATE OF DEPARTURE	492. DATE OF ENTRY	493. DATE OF DEPARTURE
494. DATE OF ENTRY	495. DATE OF DEPARTURE	496. DATE OF ENTRY	497. DATE OF DEPARTURE	498. DATE OF ENTRY	499. DATE OF DEPARTURE
500. DATE OF ENTRY	501. DATE OF DEPARTURE	502. DATE OF ENTRY	503. DATE OF DEPARTURE	504. DATE OF ENTRY	505. DATE OF DEPARTURE
506. DATE OF ENTRY	507. DATE OF DEPARTURE	508. DATE OF ENTRY	509. DATE OF DEPARTURE	510. DATE OF ENTRY	511. DATE OF DEPARTURE
512. DATE OF ENTRY	513. DATE OF DEPARTURE	514. DATE OF ENTRY	515. DATE OF DEPARTURE	516. DATE OF ENTRY	517. DATE OF DEPARTURE
518. DATE OF ENTRY	519. DATE OF DEPARTURE	520. DATE OF ENTRY	521. DATE OF DEPARTURE	522. DATE OF ENTRY	523. DATE OF DEPARTURE
524. DATE OF ENTRY	525. DATE OF DEPARTURE	526. DATE OF ENTRY	527. DATE OF DEPARTURE	528. DATE OF ENTRY	529. DATE OF DEPARTURE
530. DATE OF ENTRY	531. DATE OF DEPARTURE	532. DATE OF ENTRY	533. DATE OF DEPARTURE	534. DATE OF ENTRY	535. DATE OF DEPARTURE
536. DATE OF ENTRY	537. DATE OF DEPARTURE	538. DATE OF ENTRY	539. DATE OF DEPARTURE	540. DATE OF ENTRY	541. DATE OF DEPARTURE
542. DATE OF ENTRY	543. DATE OF DEPARTURE	544. DATE OF ENTRY	545. DATE OF DEPARTURE	546. DATE OF ENTRY	547. DATE OF DEPARTURE
548. DATE OF ENTRY	549. DATE OF DEPARTURE	550. DATE OF ENTRY	551. DATE OF DEPARTURE	552. DATE OF ENTRY	553. DATE OF DEPARTURE
554. DATE OF ENTRY	555. DATE OF DEPARTURE	556. DATE OF ENTRY	557. DATE OF DEPARTURE	558. DATE OF ENTRY	559. DATE OF DEPARTURE
560. DATE OF ENTRY	561. DATE OF DEPARTURE	562. DATE OF ENTRY	563. DATE OF DEPARTURE	564. DATE OF ENTRY	

SECRET

(S) How Filled In

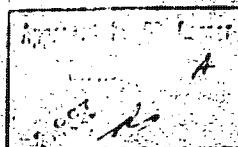
REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER										19 OCTOBER 1968	
2. NAME (Last-First-Middle)											
3. FACTORY OF PERSONNEL ACTION										4. EFFECTIVE DATE REQUESTED	
PROMOTION										MO. DAY YEAR 10 30 68	
5. FUNDS										6. CATEGORY OF EMPLOYMENT	
V TO V										REGULAR	
V TO CP										7. FINANCIAL ANALYSIS NO. CHARGEABLE	
CP TO V										9137 1375	
CP TO CP										8. LEGAL AUTHORITY (Complied by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATION										10. LOCATION OF OFFICIAL STATION	
DDP/FE										WASH., D. C.	
FE/PHI											
11. POSITION TITLE										12. POSITION NUMBER	
OPS OFFICER (D-13)										4034	
14. CLASSIFICATION SCHEDULE (U.S. F.B. #1)										15. OCCUPATIONAL SERIES	
GS										0138.01	
16. GRADE AND STEP										17. SALARY OR RATE	
GS										05/5	
13/3										\$13,330	
18. REMARKS										\$16,369	
FROM: SAME (03-12/6 to 03-13/3)											
Payroll call											
1. OF SO FE/DAF											
18A. SIGNATURE OF REQUESTING OFFICIAL										DATE SIGNED	
										18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
										DATE SIGNED	
										11/27/68	
SPACE BELOW FOR EXCLUSIVE USE OF											
19. ACTION CODE	20. EMPLOY CODE	21. GROUPS CODES	22. STATION CODE	23. INTEREST CODE	24. ROUTES CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEL			
03	10	45,44,43,42,41	75,61,3	S	1						
28. RISE SYMBOL	29. SPECIAL PREVIOUS	30. EST. PLANT DATE	31. OPERATION DATA CODE	32. EXERCISE DATE	33. SECURITY	34. LEL					
35. RISE PREVIOUS	36. WORK CODE	37. CODE CODE DATE	38. CAREER CATEGORY	39. TITLE REL. TO STATION	40. SOCIAL SECURITY						
41. PREVIOUS CIVILIAN GOVERNMENT MARKS	42. LEAVE CAT	43. FISCAL YEAR DATE	44. STATE TELEPHONE								
45. POSITION CONTROL OPERATIONS	46. OFF. APPROVAL	47. DATE APPROV									

FORM 1152 USE PREVIOUS EDITION

SECRET

FORM 1152 USE PREVIOUS EDITION

S-E-C-R-E-T



MEMORANDUM FOR: Clandestine Services Career Service Board

SUBJECT : Recommendation for Promotion from GS-12 to GS-13 for [redacted]

1. FE Division recommends the promotion of [redacted] from GS-12 to GS-13.
2. [redacted] first joined the Agency in 1955 in the DDI. He rose rapidly from GS-07 to GS-12 which grade he achieved in March 1961. He spent one overseas tour [redacted] In April 1963 he transferred to the DDP. This action and the adjustments it necessitated have undoubtedly held him back from the normal career advancement to be expected for one of his ability.
3. In the DDP [redacted] first served in Vietnam Operations in Headquarters and then from 1964-1966 in Saigon. There he performed affectively in both liaison and unilateral operations [redacted] He personally recruited several agents and established a successful [redacted] He was first recommended for promotion to GS-13 during his Vietnam tour.
4. In November 1966 [redacted] joined FE/PMI, first on the [redacted] He has served as [redacted] Desk and Branch referent for Communist Party Operations, where he proved himself to be an excellent analyst. He has also served as a desk officer handling a variety of projects. He has performed his duties in a consistently strong manner, and has shown sound operational judgment. [redacted] writes well, and gets along extremely well with his co-workers and contacts. He is now scheduled for a field assignment [redacted] in 1969. In view of his strong Headquarters desk performance and his previous recommendation from Vietnam, [redacted] was recommended for promotion again in February 1968.
5. [redacted] is an experienced and competent Headquarters and field operations officer. He has repeatedly demonstrated his ability to perform at the GS-13 level. In consideration of his fine record of productivity I recommend that he be promoted to GS-13.

William E. Nelson
William E. Nelson
Chief, Far East Division

1988-1989

REQUEST FOR PERSONNEL ACTION										DATE PREPARED			
1. SERIAL NUMBER		2. NAME (Last - First - Middle)								9 May 1968			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT										4. EFFECTIVE DATE REQUESTED MONTH: 05 DAY: 19 YEAR: 68		5. CATEGORY OF EMPLOYMENT REGULAR	
6. RACE		7. V TO V		8. V TO O		9. FINANCIAL ANALYSIS NO. CHARGEABLE		10. LEGAL AUTHORITY (Completed by Office of Personnel)					
11. ORGANIZATIONAL DESIGNATIONS DEP/VE		12. V TO V		13. V TO O		14. FINANCIAL ANALYSIS NO. CHARGEABLE 8137-1375		15. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.					
16. POSITION TITLE OPS OFFICER										17. POSITION NUMBER 4025		18. CAREER SERVICE DESIGNATION D	
19. CLASSIFICATION SYMBOL (GS, FS, etc.) PUR				20. OCCUPATIONAL SERIES 0136.01		21. GRADE AND STEP 5/5		22. SALARY OR RATE 12,604					
23. REMARKS FROM: DEVELOPMENT COMP. SLOT WAS VACANT X Wash, DC													
24. SIGNATURE OF REQUESTING OFFICIAL				25. DATE SIGNED		26. SIGNATURE OF CAREER SERVICE APPROVING OFFICIAL				27. DATE SIGNED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
28. ACTION CODE		29. EMPLOY CODE		30. OFFICE CODES NUMERICAL ALPHABETIC		31. STATION CODE		32. INTEREST CODE		33. STATUS CODE			
34. PAY LETTERS		35. PAY CODE		36. RETIREMENT DATA		37. SEPARATION DATA		38. EMPLOYMENT SEPARATION DATA		39. DATA CODE			
40. PAY LETTERS		41. PAY CODE		42. RETIREMENT DATA		43. SEPARATION DATA		44. EMPLOYMENT SEPARATION DATA		45. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS		47. PAY CODE		48. RETIREMENT DATA		49. SEPARATION DATA		50. EMPLOYMENT SEPARATION DATA		51. DATA CODE			
46. PAY LETTERS													

SECRET

30 January 1968

MEMORANDUM FOR: FE Career Management Committee

SUBJECT: Recommendation for Promotion from GS-12 to GS-13 of [redacted]

1. This office wishes to reiterate its previous endorsement of the Saigon Station's recommendation for the promotion of [redacted] from GS-12 to GS-13.

2. [redacted] was initially assigned to the [redacted] as an Operations Officer responsible for Headquarters support of the [redacted] Communist Party Operations Program. This was a demanding task requiring sound operational judgment, experience, and the capacity to absorb large quantities of operational data and information. Despite no prior background [redacted] quickly got on top of the material and projects and made a valuable contribution. He also had other duties concerned with support for other Station unilateral activity.

3. [redacted]

4. [redacted] is a capable and experienced Operations Officer. He has proven in Vietnam a unique ability to develop valuable operational assets [redacted] and his work in this branch has been excellent. In view of this good record of productivity, and as a stimulus for future development, I strongly recommend that [redacted] be promoted to GS-13.

[redacted]
Acting Chief, FE/PMI

SECRET

12 Apr 1962

REQUEST FOR PERSONNEL ACTION

DATE RECEIVED

17 November 1967

1. SOCIAL NUMBER [REDACTED]		2. NAME (Last-First-Initial) [REDACTED]			
3. NATURE OF PERSONNEL ACTION Suspension (for 3 working days)		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 01 68			
5. CATEGORY OF EMPLOYMENT Regular		6. LEGAL AUTHORITY (if completed by Office of Personnel) 50 USC 403 I			
7. FINANCIAL ANALYSIS NO. 8137-1375		8. LOCATION OF OFFICIAL STATION Washington, D.C.			
9. ORGANIZATIONAL DESIGNATION DDP/FE Development Complement		10. POSITION TITLE Ops Officer			
11. CLASSIFICATION SCHEDULE (F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BO, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, CR, CS, CT, CU, CV, CW, CX, CY, CZ, DA, DB, DC, DD, DE, DF, DG, DH, DI, DJ, DK, DL, DM, DN, DO, DP, DQ, DR, DS, DT, DU, DV, DW, DX, DY, DZ, EA, EB, EC, ED, EE, EF, EG, EH, EI, EJ, EK, EL, EM, EN, EO, EP, EQ, ER, ES, ET, EU, EV, EW, EX, EY, EZ, FA, FB, FC, FD, FE, FF, FG, FH, FI, FJ, FK, FL, FM, FN, FO, FP, FQ, FR, FS, FT, FU, FV, FW, FX, FY, FZ, GA, GB, GC, GD, GE, GF, GG, GH, GI, GJ, GK, GL, GM, GN, GO, GP, GQ, GR, GS, GT, GU, GV, GW, GX, GY, GZ, HA, HB, HC, HD, HE, HF, HG, HH, HI, HJ, HK, HL, HM, HN, HO, HP, HQ, HR, HS, HT, HU, HV, HW, HX, HY, HZ, IA, IB, IC, ID, IE, IF, IG, IH, II, IJ, IK, IL, IM, IN, IO, IP, IQ, IR, IS, IT, IU, IV, IW, IX, IY, IZ, JA, JB, JC, JD, JE, JF, JG, JH, JI, JJ, JK, JL, JM, JN, JO, JP, JQ, JR, JS, JT, JU, JV, JW, JX, JY, JZ, KA, KB, KC, KD, KE, KF, KG, KH, KI, KJ, KK, KL, KM, KN, KO, KP, KQ, KR, KS, KT, KU, KV, KW, KX, KY, KZ, LA, LB, LC, LD, LE, LF, LG, LH, LI, LJ, LK, LL, LM, LN, LO, LP, LQ, LR, LS, LT, LU, LV, LW, LX, LY, LZ, MA, MB, MC, MD, ME, MF, MG, MH, MI, MJ, MK, ML, MM, MN, MO, MP, MQ, MR, MS, MT, MU, MV, MW, MX, MY, MZ, NA, NB, NC, ND, NE, NF, NG, NH, NI, NJ, NK, NL, NM, NN, NO, NP, NQ, NR, NS, NT, NU, NV, NW, NX, NY, NZ, OA, OB, OC, OD, OE, OF, OG, OH, OI, OJ, OK, OL, OM, ON, OO, OP, OQ, OR, OS, OT, OU, OV, OW, OX, OY, OZ, PA, PB, PC, PD, PE, PF, PG, PH, PI, PJ, PK, PL, PM, PN, PO, PP, PQ, PR, PS, PT, PU, PV, PW, PX, PY, PZ, QA, QB, QC, QD, QE, QF, QG, QH, QI, QJ, QK, QL, QM, QN, QO, QP, QQ, QR, QS, QT, QU, QV, QW, QX, QY, QZ, RA, RB, RC, RD, RE, RF, RG, RH, RI, RJ, RK, RL, RM, RN, RO, RP, RQ, RR, RS, RT, RU, RV, RW, RX, RY, RZ, SA, SB, SC, SD, SE, SF, SG, SH, SI, SJ, SK, SL, SM, SN, SO, SP, SQ, SR, SS, ST, SU, SV, SW, SX, SY, SZ, TA, TB, TC, TD, TE, TF, TG, TH, TI, TJ, TK, TL, TM, TN, TO, TP, TQ, TR, TS, TT, TU, TV, TW, TX, TY, TZ, UA, UB, UC, UD, UE, UF, UG, UH, UI, UJ, UK, UL, UM, UN, UO, UP, UQ, UR, US, UT, UU, UV, UW, UX, UY, UZ, VA, VB, VC, VD, VE, VF, VG, VH, VI, VJ, VK, VL, VM, VN, VO, VP, VQ, VR, VS, VT, VU, VW, VX, VY, VZ, WA, WB, WC, WD, WE, WF, WG, WH, WI, WJ, WK, WL, WM, WN, WO, WP, WQ, WR, WS, WT, WU, WV, WW, WX, WY, WZ, XA, XB, XC, XD, XE, XF, XG, XH, XI, XJ, XK, XL, XM, XN, XO, XP, XQ, XR, XS, XT, XU, XV, XW, XX, XY, XZ, YA, YB, YC, YD, YE, YF, YG, YH, YI, YJ, YK, YL, YM, YN, YO, YP, YQ, YR, YS, YT, YU, YV, YW, YX, YY, YZ, ZA, ZB, ZC, ZD, ZE, ZF, ZG, ZH, ZI, ZJ, ZK, ZL, ZM, ZN, ZO, ZP, ZQ, ZR, ZS, ZT, ZU, ZV, ZW, ZX, ZY, ZZ		12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D	
14. OCCUPATIONAL SERIES 0136.01		15. GRADE AND STEP 5 5 12 5		16. SALARY OF PAY 12 5 12 5	
17. REMARKS From 1150 Remarks: Suspended for three working days for infraction of Agency physical security regulations. To return to duty BOB 4 April 1968. Employee is warned that further violations will be viewed with extreme seriousness.					
18. SIGNATURE OF REQUESTING OFFICIAL [REDACTED]		19. DATE SIGNED 11/11/68		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [REDACTED]	
21. DATE SIGNED 28/11/68		22. SPECIAL INSTRUCTIONS FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
23. DATE SIGNED [REDACTED]		24. DATE SIGNED [REDACTED]			
25. DATE SIGNED [REDACTED]		26. DATE SIGNED [REDACTED]			
27. DATE SIGNED [REDACTED]		28. DATE SIGNED [REDACTED]			
29. DATE SIGNED [REDACTED]		30. DATE SIGNED [REDACTED]			
31. DATE SIGNED [REDACTED]		32. DATE SIGNED [REDACTED]			
33. DATE SIGNED [REDACTED]		34. DATE SIGNED [REDACTED]			
35. DATE SIGNED [REDACTED]		36. DATE SIGNED [REDACTED]			
37. DATE SIGNED [REDACTED]		38. DATE SIGNED [REDACTED]			
39. DATE SIGNED [REDACTED]		40. DATE SIGNED [REDACTED]			
41. DATE SIGNED [REDACTED]		42. DATE SIGNED [REDACTED]			
43. DATE SIGNED [REDACTED]		44. DATE SIGNED [REDACTED]			
45. DATE SIGNED [REDACTED]		46. DATE SIGNED [REDACTED]			
47. DATE SIGNED [REDACTED]		48. DATE SIGNED [REDACTED]			
49. DATE SIGNED [REDACTED]		50. DATE SIGNED [REDACTED]			
51. DATE SIGNED [REDACTED]		52. DATE SIGNED [REDACTED]			
53. DATE SIGNED [REDACTED]		54. DATE SIGNED [REDACTED]			
55. DATE SIGNED [REDACTED]		56. DATE SIGNED [REDACTED]			
57. DATE SIGNED [REDACTED]		58. DATE SIGNED [REDACTED]			
59. DATE SIGNED [REDACTED]		60. DATE SIGNED [REDACTED]			
61. DATE SIGNED [REDACTED]		62. DATE SIGNED [REDACTED]			
63. DATE SIGNED [REDACTED]		64. DATE SIGNED [REDACTED]			
65. DATE SIGNED [REDACTED]		66. DATE SIGNED [REDACTED]			
67. DATE SIGNED [REDACTED]		68. DATE SIGNED [REDACTED]			
69. DATE SIGNED [REDACTED]		70. DATE SIGNED [REDACTED]			
71. DATE SIGNED [REDACTED]		72. DATE SIGNED [REDACTED]			
73. DATE SIGNED [REDACTED]		74. DATE SIGNED [REDACTED]			
75. DATE SIGNED [REDACTED]		76. DATE SIGNED [REDACTED]			
77. DATE SIGNED [REDACTED]		78. DATE SIGNED [REDACTED]			
79. DATE SIGNED [REDACTED]		80. DATE SIGNED [REDACTED]			
81. DATE SIGNED [REDACTED]		82. DATE SIGNED [REDACTED]			
83. DATE SIGNED [REDACTED]		84. DATE SIGNED [REDACTED]			
85. DATE SIGNED [REDACTED]		86. DATE SIGNED [REDACTED]			
87. DATE SIGNED [REDACTED]		88. DATE SIGNED [REDACTED]			
89. DATE SIGNED [REDACTED]		90. DATE SIGNED [REDACTED]			
91. DATE SIGNED [REDACTED]		92. DATE SIGNED [REDACTED]			
93. DATE SIGNED [REDACTED]		94. DATE SIGNED [REDACTED]			
95. DATE SIGNED [REDACTED]		96. DATE SIGNED [REDACTED]			
97. DATE SIGNED [REDACTED]		98. DATE SIGNED [REDACTED]			
99. DATE SIGNED [REDACTED]		100. DATE SIGNED [REDACTED]			
101. DATE SIGNED [REDACTED]		102. DATE SIGNED [REDACTED]			
103. DATE SIGNED [REDACTED]		104. DATE SIGNED [REDACTED]			
105. DATE SIGNED [REDACTED]		106. DATE SIGNED [REDACTED]			
107. DATE SIGNED [REDACT					

27 MAR 1961

SECRET

2000-01-01

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER				20 NOVEMBER 1967	
2. NAME (Last-First-Middle)					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
				MONTH DAY YEAR	
				11 21 67	
5. CATEGORY OF EMPLOYMENT				REGULAR	
6. FUND				7. FINANCIAL ANALYSIS NO. CHARGEABLE	
<input type="checkbox"/> F 100 <input type="checkbox"/> F 101 <input checked="" type="checkbox"/> F 102 <input type="checkbox"/> F 103				8137 1375	
8. ORGANIZATIONAL DESIGNATION				9. LOCATION OF OFFICIAL STATION	
DDP/FE DEVELOPMENT COMPLEMENT				WASHINGTON, D. C.	
10. POSITION TITLE				11. POSITION NUMBER	
OPS. OFFICER				9997	
12. CLASSIFICATION SCHEDULE (F.S. 1.B. 1)				13. CAREER SERVICE DESIGNATION	
FSR GS				D	
14. OCCUPATIONAL SERIES				15. GRADE AND STEP	
0136.01				5 5 12 5	
16. REMARKS				17. SALARY OR RATE	
All SICK AND All HOURS ANNUAL LEAVE TO BE TRANSFERRED				12,074 12,443	
MARITAL STATUS: MARRIED					
18A. SIGNATURE OF REQUESTING OFFICIAL				18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
[Signature]				[Signature]	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION	20. REPORT	21. DATE	22. STATION	23. INITIALS	24. DATE OF BIRTH
55	18	11/21/67	FE	75013	
25. DATE	26. DATE	27. DATE	28. DATE	29. DATE	30. DATE
31. DATE	32. DATE	33. DATE	34. DATE	35. DATE	36. DATE
37. DATE	38. DATE	39. DATE	40. DATE	41. DATE	42. DATE
43. DATE	44. DATE	45. DATE	46. DATE	47. DATE	48. DATE
49. DATE	50. DATE	51. DATE	52. DATE	53. DATE	54. DATE
55. DATE	56. DATE	57. DATE	58. DATE	59. DATE	60. DATE
61. DATE	62. DATE	63. DATE	64. DATE	65. DATE	66. DATE
67. DATE	68. DATE	69. DATE	70. DATE	71. DATE	72. DATE
73. DATE	74. DATE	75. DATE	76. DATE	77. DATE	78. DATE
79. DATE	80. DATE	81. DATE	82. DATE	83. DATE	84. DATE
85. DATE	86. DATE	87. DATE	88. DATE	89. DATE	90. DATE
91. DATE	92. DATE	93. DATE	94. DATE	95. DATE	96. DATE
97. DATE	98. DATE	99. DATE	100. DATE	101. DATE	102. DATE

K-1157

100-1157-100-1157

SECRET

100-1157-100-1157

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 30 October 1967	
1. SERIAL NUMBER		2. NAME (Last-First-Middle) <div style="border: 1px solid black; height: 15px; width: 100%;"></div>			
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Confidential Funds			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR // 10 19 67		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS	V TO V	X	V TO O	7. FINANCIAL ANALYSIS NO. CHARGEABLE 8137-1392	8. LEGAL AUTHORITY (Completed by Office of Personnel)
	O TO V		O TO O		
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/Development Complement			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Ops Officer			12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		17. SALARY OR RATE \$ 12,443	
16. REMARKS <div style="border: 1px solid black; height: 40px; width: 100%;"></div>					
18. SIGNATURE OF REQUESTING OFFICER <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		DATE SIGNED 30 OCT 1967		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
DATE SIGNED 30 OCT 1967		DATE SIGNED 30 OCT 1967			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
20. ACTION CODE 90	21. EMPLOY CODE 103	22. OFFICE CODES POLYGRAPH ALPHABETIC 25492 FE	23. STATION CODE 25013	24. POSITION CODE 1	25. DATE OF BIRTH MO DA YR [] [] []
26. DATE OF GRADE MO DA YR [] [] []	27. DATE OF LEI MO DA YR [] [] []	28. SPECIAL REFERENCE [] [] []	29. OFFICIAL DATA [] [] []	30. REGISTRATION DATA CODE TYPE MO DA YR [] [] []	31. COLLECTION (CERTIFICATION) DATA TYPE MO DA YR [] [] []
32. SECURITY REG NO	33. SEC	34. NET PREFERENCE CODE 1-1000 1-1000 1-1000	35. DATE OF EMP DATA MO DA YR [] [] []	36. DATE OF EMP DATA MO DA YR [] [] []	37. DATE OF EMP DATA MO DA YR [] [] []
38. PHYSICAL FITNESS GOVERNMENT AFFAIRS CODE 1-1000 1-1000 1-1000	39. LEAD CODE CODE 1-1000 1-1000 1-1000	40. REGION DATA CODE 1-1000 1-1000 1-1000	41. STAFF DATA CODE 1-1000 1-1000 1-1000	42. STAFF DATA CODE 1-1000 1-1000 1-1000	43. STAFF DATA CODE 1-1000 1-1000 1-1000
44. POSITION CLASSIFICATION CERTIFICATION			45. DATE APPROVED		

1152 1152 PERSONNEL ACTION

SECRET

14-00000

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

13 May 1967

1. SERIAL NUMBER
2. NAME (Last, First, Middle)

3. NATURE OF PERSONNEL ACTION

Reassignment

4. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR
05 21 67

5. CATEGORY OF EMPLOYMENT

Regular

6. FUNDS



X V TO V

V TO O

O TO V

O TO O

7. COST CENTER NO. CHARGEABLE

7237-1385

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

DDP/FE

10. LOCATION OF OFFICIAL STATION

Washington, D.C.

11. POSITION TITLE

Ops Officer

D-12

12. POSITION NUMBER

3877

13. CAREER SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

12 5

17. SALARY OR RATE

\$ 12,443

18. REMARKS

FROM:

19A. SIGNATURE

DATE SIGNED

5/15/67

19B. SIGNATURE OF CAREER SERVICE

CER

DATE SIGNED

7/18/67

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37 10	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC ALPHABETIC 43740 FC 75412	22. STATION CODE 75412	23. INTERPRET CODE 1	24. MONTHS CODE 1	25. DATE OF BIRTH MO DA YR [] [] []	26. DATE OF GRADE MO DA YR [] [] []	27. DATE OF LEL MO DA YR [] [] []		
28. INT. EXPIRES. MO DA YR [] [] []	29. SPECIAL REFERENCE 1-CX 2-FILA 3-NORS	30. RETIREMENT DATA CODE []	31. SEPARATION DATA CODE []	32. CORRECTION CANCELLATION DATA PPH MO DA YR [] [] [] []	EOD DATA →				33. SECURITY REQ. NO. []	34. SER []
35. LEL PREFERENCE CODE 1-B-NO 2-1-PI 3-10-PI	36. SERV COMP DATE MO DA YR [] [] []	37. LONG COMP DATE MO DA YR [] [] []	38. CAREER CATEGORY CAR BSY PERS TROP CODE []	39. FLIGHT HEALTH INSURANCE CODE 1-FL 2-FL					40. SOCIAL SECURITY NO. [] [] [] [] [] []	
41. PREVIOUS COMPONENT SERVICE DATA CODE 1-NO FOREIGN SERVICE 2-NO ARMY OR NAVY 3-NO ARMY OR NAVY (LESS THAN 3 YEARS) 4-ARMY OR NAVY (MORE THAN 3 YEARS)		42. LEAVE CAT CODE []	43. FEDERAL DATA FORM EXECUTED CODE 1-FL 2-NO	44. FEDERAL DATA NO TAB RESUMPTIONS FORM EXECUTED CODE 1-FL 2-NO	45. STATE TAB DATA STATE TAB DATA CODE 1-FL 2-NO	46. STATE TAB DATA STATE TAB DATA CODE 1-FL 2-NO				
47. POSITION CONTROL CERTIFICATION 05-16:67N				48. DATE APPROVED 05/16/67						

FORM 1152 USE PREVIOUS EDITION

SECRET

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

(44-1112) (2)

DATE PREPARED

20 October 1966

1182

SECRET

SECRET

SECRET

(When Filled In)

F23

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				8 Sept 66	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 25 66	
5. CATEGORY OF EMPLOYMENT REGULAR				6. FINANCIAL ANALYSIS NO CHARGEABLE 7137-1487	
7. PAY TO V V TO V C TO V X O TO O				8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION	
DDP/FE					
11. POSITION TITLE				12. POSITION NUMBER	
14. CLASSIFICATION SCHEDULE (GS, LB, FE, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 12	
				17. SALARY OR RATE D	
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE					
18A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INITIALS CODE	24. POSTS CODE
25. DATE OF BIRTH MO DA YR	26. DATE OF DEATH MO DA YR	27. DATE OF SEPARATION MO DA YR	28. DATE OF REENTRY MO DA YR	29. DATE OF RESIGNATION MO DA YR	30. DATE OF RETIREMENT MO DA YR
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO MORE THAN 10 YEARS 2-LESS THAN 10 YEARS (LESS THAN 5 YEARS) 3-10 YEARS OR MORE (MORE THAN 5 YEARS)	32. LEAVE CAT CODE	33. LEAVE CAT CODE	34. LEAVE CAT CODE	35. LEAVE CAT CODE	36. LEAVE CAT CODE
37. POSITION CONTROL CERTIFICATION	38. CP APPROVAL	39. DATE APPROVED	40. DATE APPROVED	41. DATE APPROVED	42. DATE APPROVED
	See memo signed by D/Pers dated 2/19/66				

FORM 1152 USE PREVIOUS EDITION
SEP 66

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

3 November 1964

1. NAME - Last, first, middle

NATURE OF PERSONNEL ACTION

REASSIGNMENT

2. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR
12 64

3. CATEGORY OF EMPLOYMENT

REGULAR

4. FUNDS

V TO V

V TO C

C TO V

X C TO C

5. COST CENTER NO. CHARGE

5137-1487

6. LEGAL AUTHORITY (Completed by Office of Personnel)

7. ORGANIZATIONAL DESIGNATIONS

DDP/FE

8. LOCATION OF OFFICIAL STATION

9. POSITION TITLE

OPS OFFICER

10. POSITION NUMBER

4608

11. CAREER SERVICE DESIGNATION

D

12. CLASSIFICATION SCHEDULE (GS, LA, etc.)

GS

13. OCCUPATIONAL SERIES

0136.01

14. GRADE AND STEP

12 4

15. SALARY OR RATE

\$ 11,315

16. REMARKS

Subject to Medical Approval.

FROM: DDP/FE

FE/LSV COMP

ONE COPY TO SECURITY
ONE COPY TO CF PAYROLL

FOR FURTHER INFORMATION CALL X5459

16A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		16B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
		11/10/64				11-10-64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
17. ACTION CODE	18. EMPLOY CODE	19. OFFICE CODES FUNCTIONAL ALPHABETIC	20. STATION CODE	21. DUTY STATION CODE	22. ROUTING CODE	23. DATE OF BIRTH	24. DATE OF DEATH
44	10	0-5-6-5-5	0136.01		3		
25. ATE CODES	26. SOCIAL SECURITY	27. RETIREMENT DATA	28. SEPARATION DATA (CODE)	29. CORRECTION (CANCELLATION DATA)	30. SECURITY	31. SIF	
NO. DA. YR.	NO. DA. YR.	NO. DA. YR.	NO. DA. YR.	NO. DA. YR.	NO. DA. YR.	NO. DA. YR.	
32. ATE PREFERENCE	33. ATE CODES	34. LONG COMP. DATE	35. CAREER CATEGORY	36. HEALTH INSURANCE	37. SOCIAL SECURITY NO.		
CODE	NO. DA. YR.	NO. DA. YR.	CODE	CODE	NO.		
38. PREVIOUS GOVERNMENT SERVICE DATA	39. LEAVE CAT. CODE	40. FEDERAL TAX DATA	41. HEALTH INSURANCE	42. SOCIAL SECURITY NO.			
CODE	CODE	CODE	CODE	NO.			
43. POSITION CONTROL CERTIFICATION	44. OFF. OF APPROVAL	45. DATE APPROVED					

FORM 1152 USE PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER										17 September 1964	
2. NAME (Last - First - Middle)											
3. EFFECTIVE DATE REQUESTED										4. CATEGORY OF EMPLOYMENT	
MONTH DAY YEAR 9 18 64										Regular	
5. COST CENTER NO. CHARGE										6. LEGAL AUTHORITY (Completed by Office of Personnel)	
5137-1392											
7. ORGANIZATIONAL DESIGNATIONS										8. LOCATION OF OFFICIAL STATION	
DDP/FE 65/CS Development Complement										Washington, D. C.	
9. POSITION TITLE										10. POSITION NUMBER	
Ops Off										9997	
11. CLASSIFICATION SCHEDULE (G.S. F.R. 14.)										12. CAREER SERVICE DESIGNATION	
GS										D	
13. OCCUPATIONAL SERIES										14. SALARY OR RATE	
0136.01										\$10,290 \$11,315	
15. REMARKS											
All sick and all hours annual leave to be transferred MARITAL STATUS: Married Training											
16. SIGNATURE OF CAREER SERVICE APPROVING OFFICER										DATE SIGNED	
17. USE OF THE OFFICE OF PERSONNEL											
18. ACTION CODE		19. EMPLOY CODE		20. OFFICE CODING		21. STATION CODE		22. INTEREST CODE		23. DATE OF BIRTH	
55 13		115497		FE		75012					
24. DATE OF BIRTH		25. DATE OF GRADE		26. DATE OF PAY		27. DATE OF PAY		28. DATE OF PAY		29. DATE OF PAY	
30. DATE OF PAY		31. DATE OF PAY		32. DATE OF PAY		33. DATE OF PAY		34. DATE OF PAY		35. DATE OF PAY	
36. DATE OF PAY		37. DATE OF PAY		38. DATE OF PAY		39. DATE OF PAY		40. DATE OF PAY		41. DATE OF PAY	
42. DATE OF PAY		43. DATE OF PAY		44. DATE OF PAY		45. DATE OF PAY		46. DATE OF PAY		47. DATE OF PAY	
48. DATE OF PAY		49. DATE OF PAY		50. DATE OF PAY		51. DATE OF PAY		52. DATE OF PAY		53. DATE OF PAY	
54. DATE OF PAY		55. DATE OF PAY		56. DATE OF PAY		57. DATE OF PAY		58. DATE OF PAY		59. DATE OF PAY	
60. DATE OF PAY		61. DATE OF PAY		62. DATE OF PAY		63. DATE OF PAY		64. DATE OF PAY		65. DATE OF PAY	
66. DATE OF PAY		67. DATE OF PAY		68. DATE OF PAY		69. DATE OF PAY		70. DATE OF PAY		71. DATE OF PAY	
72. DATE OF PAY		73. DATE OF PAY		74. DATE OF PAY		75. DATE OF PAY		76. DATE OF PAY		77. DATE OF PAY	
78. DATE OF PAY		79. DATE OF PAY		80. DATE OF PAY		81. DATE OF PAY		82. DATE OF PAY		83. DATE OF PAY	
84. DATE OF PAY		85. DATE OF PAY		86. DATE OF PAY		87. DATE OF PAY		88. DATE OF PAY		89. DATE OF PAY	
90. DATE OF PAY		91. DATE OF PAY		92. DATE OF PAY		93. DATE OF PAY		94. DATE OF PAY		95. DATE OF PAY	
96. DATE OF PAY		97. DATE OF PAY		98. DATE OF PAY		99. DATE OF PAY		100. DATE OF PAY		101. DATE OF PAY	
102. DATE OF PAY		103. DATE OF PAY		104. DATE OF PAY		105. DATE OF PAY		106. DATE OF PAY		107. DATE OF PAY	
108. DATE OF PAY		109. DATE OF PAY		110. DATE OF PAY		111. DATE OF PAY		112. DATE OF PAY		113. DATE OF PAY	
114. DATE OF PAY		115. DATE OF PAY		116. DATE OF PAY		117. DATE OF PAY		118. DATE OF PAY		119. DATE OF PAY	
120. DATE OF PAY		121. DATE OF PAY		122. DATE OF PAY		123. DATE OF PAY		124. DATE OF PAY		125. DATE OF PAY	
126. DATE OF PAY		127. DATE OF PAY		128. DATE OF PAY		129. DATE OF PAY		130. DATE OF PAY		131. DATE OF PAY	
132. DATE OF PAY		133. DATE OF PAY		134. DATE OF PAY		135. DATE OF PAY		136. DATE OF PAY		137. DATE OF PAY	
138. DATE OF PAY		139. DATE OF PAY		140. DATE OF PAY		141. DATE OF PAY		142. DATE OF PAY		143. DATE OF PAY	
144. DATE OF PAY		145. DATE OF PAY		146. DATE OF PAY		147. DATE OF PAY		148. DATE OF PAY		149. DATE OF PAY	
150. DATE OF PAY		151. DATE OF PAY		152. DATE OF PAY		153. DATE OF PAY		154. DATE OF PAY		155. DATE OF PAY	
156. DATE OF PAY		157. DATE OF PAY		158. DATE OF PAY		159. DATE OF PAY		160. DATE OF PAY		161. DATE OF PAY	
162. DATE OF PAY		163. DATE OF PAY		164. DATE OF PAY		165. DATE OF PAY		166. DATE OF PAY		167. DATE OF PAY	
168. DATE OF PAY		169. DATE OF PAY		170. DATE OF PAY		171. DATE OF PAY		172. DATE OF PAY		173. DATE OF PAY	
174. DATE OF PAY		175. DATE OF PAY		176. DATE OF PAY		177. DATE OF PAY		178. DATE OF PAY		179. DATE OF PAY	
180. DATE OF PAY		181. DATE OF PAY		182. DATE OF PAY		183. DATE OF PAY		184. DATE OF PAY		185. DATE OF PAY	
186. DATE OF PAY		187. DATE OF PAY		188. DATE OF PAY		189. DATE OF PAY		190. DATE OF PAY		191. DATE OF PAY	
192. DATE OF PAY		193. DATE OF PAY		194. DATE OF PAY		195. DATE OF PAY		196. DATE OF PAY		197. DATE OF PAY	
198. DATE OF PAY		199. DATE OF PAY		200. DATE OF PAY		201. DATE OF PAY		202. DATE OF PAY		203. DATE OF PAY	
204. DATE OF PAY		205. DATE OF PAY		206. DATE OF PAY		207. DATE OF PAY		208. DATE OF PAY		209. DATE OF PAY	
210. DATE OF PAY		211. DATE OF PAY		212. DATE OF PAY		213. DATE OF PAY		214. DATE OF PAY		215. DATE OF PAY	
216. DATE OF PAY		217. DATE OF PAY		218. DATE OF PAY		219. DATE OF PAY		220. DATE OF PAY		221. DATE OF PAY	
222. DATE OF PAY		223. DATE OF PAY		224. DATE OF PAY		225. DATE OF PAY		226. DATE OF PAY		227. DATE OF PAY	
228. DATE OF PAY		229. DATE OF PAY		230. DATE OF PAY		231. DATE OF PAY		232. DATE OF PAY		233. DATE OF PAY	
234. DATE OF PAY		235. DATE OF PAY		236. DATE OF PAY		237. DATE OF PAY		238. DATE OF PAY		239. DATE OF PAY	
240. DATE OF PAY		241. DATE OF PAY		242. DATE OF PAY		243. DATE OF PAY		244. DATE OF PAY		245. DATE OF PAY	
246. DATE OF PAY		247. DATE OF PAY		248. DATE OF PAY		249. DATE OF PAY		250. DATE OF PAY		251. DATE OF PAY	
252. DATE OF PAY		253. DATE OF PAY		254. DATE OF PAY		255. DATE OF PAY		256. DATE OF PAY		257. DATE OF PAY	
258. DATE OF PAY		259. DATE OF PAY		260. DATE OF PAY		261. DATE OF PAY		262. DATE OF PAY		263. DATE OF PAY	
264. DATE OF PAY		265. DATE OF PAY		266. DATE OF PAY		267. DATE OF PAY		268. DATE OF PAY		269. DATE OF PAY	
270. DATE OF PAY		271. DATE OF PAY		272. DATE OF PAY		273. DATE OF PAY		274. DATE OF PAY		275. DATE OF PAY	
276. DATE OF PAY		277. DATE OF PAY		278. DATE OF PAY		279. DATE OF PAY		280. DATE OF PAY		281. DATE OF PAY	
282. DATE OF PAY		283. DATE OF PAY		284. DATE OF PAY		285. DATE OF PAY		286. DATE OF PAY		287. DATE OF PAY	
288. DATE OF PAY		289. DATE OF PAY		290. DATE OF PAY		291. DATE OF PAY		292. DATE OF PAY		293. DATE OF PAY	
294. DATE OF PAY		295. DATE OF PAY		296. DATE OF PAY		297. DATE OF PAY		298. DATE OF PAY		299. DATE OF PAY	
300. DATE OF PAY		301. DATE OF PAY		302. DATE OF PAY		303. DATE OF PAY		304. DATE OF PAY		305. DATE OF PAY	
306. DATE OF PAY		307. DATE OF PAY		308. DATE OF PAY		309. DATE OF PAY		310. DATE OF PAY		311. DATE OF PAY	
312. DATE OF PAY		313. DATE OF PAY		314. DATE OF PAY		315. DATE OF PAY		316. DATE OF PAY		317. DATE OF PAY	
318. DATE OF PAY		319. DATE OF PAY		320. DATE OF PAY		321. DATE OF PAY		322. DATE OF PAY		323. DATE OF PAY	
324. DATE OF PAY		325. DATE OF PAY		326. DATE OF PAY		327. DATE OF PAY		328. DATE OF PAY		329. DATE OF PAY	
330. DATE OF PAY		331. DATE OF PAY		332. DATE OF PAY		333. DATE OF PAY		334. DATE OF PAY		335. DATE OF PAY	
336. DATE OF PAY		337. DATE OF PAY		338. DATE OF PAY		339. DATE OF PAY		340. DATE OF PAY		341. DATE OF PAY	
342. DATE OF PAY		343. DATE OF PAY		344. DATE OF PAY		345. DATE OF PAY		346. DATE OF PAY		347. DATE OF PAY	
348. DATE OF PAY		349. DATE OF PAY		350. DATE OF PAY		351. DATE OF PAY		352. DATE OF PAY		353. DATE OF PAY	
354. DATE OF PAY		355. DATE OF PAY		356. DATE OF PAY		357. DATE OF PAY		358. DATE OF PAY		359. DATE OF PAY	
360. DATE OF PAY		361. DATE OF PAY		362. DATE OF PAY		363. DATE OF PAY		364. DATE OF PAY		365. DATE OF PAY	
366. DATE OF PAY		367. DATE OF PAY		368. DATE OF PAY		369. DATE OF PAY		370. DATE OF PAY		371. DATE OF PAY	
372. DATE OF PAY		373. DATE OF PAY		374. DATE OF PAY		375. DATE OF PAY		376. DATE OF PAY		377. DATE OF PAY	
378. DATE OF PAY		379. DATE OF PAY		380. DATE OF PAY		381. DATE OF PAY		382. DATE OF PAY		383. DATE OF PAY	
384. DATE OF PAY		385. DATE OF PAY		386. DATE OF PAY		387. DATE OF PAY		388. DATE OF PAY		389. DATE OF PAY	
390. DATE OF PAY		391. DATE OF PAY		392. DATE OF PAY		393. DATE OF PAY		394. DATE OF PAY		395. DATE OF PAY	
396. DATE OF PAY		397. DATE OF PAY		398. DATE OF PAY		399. DATE OF PAY		400. DATE OF PAY		401. DATE OF PAY	
402. DATE OF PAY		403. DATE OF PAY		404. DATE OF PAY		405. DATE OF PAY		406. DATE OF PAY		407. DATE OF PAY	
408. DATE OF PAY		409. DATE OF PAY		410. DATE OF PAY		411. DATE OF PAY		412. DATE OF PAY		413. DATE OF PAY	
414. DATE OF PAY		415. DATE OF PAY		416. DATE OF PAY		417. DATE OF PAY		418. DATE OF PAY		419. DATE OF PAY	
420. DATE OF PAY		421. DATE OF PAY		422. DATE OF PAY		423. DATE OF PAY		424. DATE OF PAY		425. DATE OF PAY	
426. DATE OF PAY		427. DATE OF PAY		428. DATE OF PAY		429. DATE OF PAY		430. DATE OF PAY		431. DATE OF PAY	
432. DATE OF PAY		433. DATE OF PAY		434. DATE OF PAY		435. DATE OF PAY		436. DATE OF PAY		437. DATE OF PAY	
438. DATE OF PAY		439. DATE OF PAY		440. DATE OF PAY		441. DATE OF PAY		442. DATE OF PAY		443. DATE OF PAY	
444. DATE OF PAY		445. DATE OF PAY		446. DATE OF PAY		447. DATE OF PAY		448. DATE OF PAY		449. DATE OF PAY	
450. DATE OF PAY		451. DATE OF PAY		452. DATE OF PAY		453. DATE OF PAY		454. DATE OF PAY		455. DATE OF PAY	
456. DATE OF PAY		457. DATE OF PAY									

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3 September 1964	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS					
4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 9 13 64		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS V TO V C TO V		7. COST CENTER NO. CHARGE-ABLE 5137-1392		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE <i>cs/cs</i> DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, PM, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 ① 4	
17. SALARY OR RATE 11,315 \$10,960		18. REMARKS			

ONE COPY TO SECURITY
ONE COPY TO VOUCHERED PAYROLL

FOR FURTHER INFORMATION CALL 55459

10A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED 9/11/64		10B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 9-11-64	
LOW FOR EXCLUSIVE USE OF							
19. ACTION CODE 20	20. EMP. CODE 13	21. OFFICE CODING NUMERIC ALPHABETIC 46997 12		22. STATION CODE 1513	23. INTEREST CODE	24. HOOURS CODE	25. DATE OF BIRTH MO. DA. YR.
26. DATE OF GRAB MO. DA. YR.	27. DATE OF LST MO. DA. YR.	28. SPECIAL REFERENCE	29. RETIREMENT DATA 1-15 2-15 3-15 4-15	30. SEPARATION DATA CODE	31. CORRECTION/CONVERSION DATA TYPE MO. DA. YR.	32. SECURITY RFO NO.	33. SEC.
34. VET. PREFERENCE CODE 0-NONE 1-10 2-15	35. SERV. COMP. DATE MO. DA. YR.	36. LONG. COMP. DATE MO. DA. YR.	37. CAREER CATEGORY CODE 0-NONE 1-15 2-15	38. LEGAL HEALTH INSURANCE CODE 0-NONE 1-15	39. SOCIAL SECURITY NO.	40. STATE TAX DATA CODE 0-NONE 1-15 2-15	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-15 2-15 3-15 4-15		42. SERV. CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 0-NONE 1-15 2-15	44. STATE TAX DATA FORM EXECUTED CODE 0-NONE 1-15 2-15	45. DATE APPROVED 9-11-64		

SUBJECT: Letter of Condolence



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 9 MARCH 1963	
<div style="border: 1px solid black; width: 200px; height: 30px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 200px; height: 30px;"></div>					
1. NATURE OF PERSONNEL ACTION REASSIGNMENT And change of service Designation			4. EFFECTIVE DATE REQUESTED 04 MAY 1963		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS: <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CP <input type="checkbox"/> CP TO V <input type="checkbox"/> CP TO CP			7. COST CENTER NO. CHARGEABLE 3237-1250-1000		8. LOCAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS LDP/FE			10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 2608		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12 X2		17. SALARY OR RATE \$9790
18. REMARKS FROM: DDI/OKR					

8 Mar 1963

MEMORANDUM FOR: CSFO/Brach C

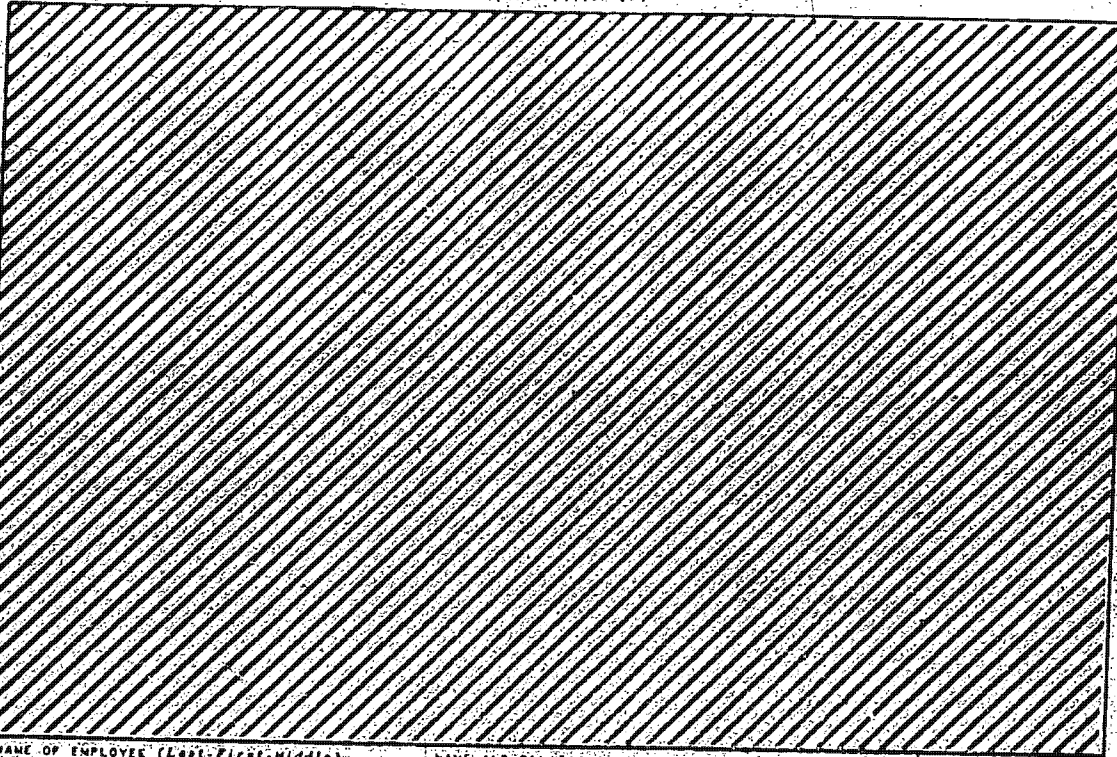


Approved by C/PNC
R.S. Shroy, Secy/PNC
15 MAR 1963

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED																																																																																																					
1. SERIAL NUMBER		2. NAME (Last-First-Middle)								23 November 1962																																																																																																					
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Vouchered Funds										4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 22 62		5. CATEGORY OF EMPLOYMENT Regular																																																																																																			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHANGE-ABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)																																																																																																							
XX		CF TO V		CF TO CF		3257-1019-6000																																																																																																									
9. ORGANIZATIONAL DESIGNATIONS DDI/ORR										10. LOCATION OF OFFICIAL STATION Washington, D. C.																																																																																																					
11. POSITION TITLE I.O. (Factory Markers)										12. POSITION NUMBER 1564		13. CAREER SERVICE DESIGNATION JR																																																																																																			
14. CLASSIFICATION SCHEDULE (GS, LD, etc.) GS				15. OCCUPATIONAL SERIES 1390-08 0132-00		16. GRADE AND STEP 12 2		17. SALARY OR RATE 9,700																																																																																																							
18. REMARKS Attached are: Form W-4, Employee's Withholding Exemption Certificate Form D-4-A, Certificate of Non-Residence in the District of Columbia Form Va.-4, Virginia Employee's Withholding Exemption Certificate Copies to: Payroll Security <div style="border: 1px solid black; height: 40px; width: 100%;"></div>																																																																																																															
										DATE SIGNED 17 DEC 1962																																																																																																					
<table border="1"> <tr> <td>19. TRANSFER CODE</td> <td>20. EMPLOY CODE</td> <td colspan="2">21. OFFICE CODING</td> <td>22. STATION CODE</td> <td>23. INTEREST CODE</td> <td>24. MOOTPS CODE</td> <td>25. DATE OF BIRTH</td> <td>26. DATE OF GRAD</td> <td>27. DATE OF USL</td> </tr> <tr> <td>10</td> <td>10</td> <td>28.100</td> <td>ORR</td> <td>750-13</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2">28. DATE EXPIRES</td> <td colspan="2">29. SPECIAL REFERENCE</td> <td colspan="2">30. RETIREMENT DATA</td> <td colspan="2">31. SEPARATION DATA CODE</td> <td colspan="2">32. CORRECTION/ANCELLATION DATA</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">EOD DATA</td> </tr> <tr> <td colspan="2">33. SET PREFERENCE</td> <td colspan="2">34. SERV. COMP. DATA</td> <td colspan="2">35. LONG. COMP. DATA</td> <td colspan="2">36. CARRIER CATEGORY</td> <td colspan="2">37. RECL. / M.R. / INSURANCE</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">38. PREVIOUS GOVERNMENT SERVICE DATA</td> <td colspan="2">39. MILITARY DATA</td> <td colspan="2">40. FEDERAL TAX DATA</td> <td colspan="2">41. STATE TAX DATA</td> <td colspan="2">42. SOCIAL SECURITY NO.</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">43. POSITION CONTROL CERTIFICATION</td> <td colspan="2">44. G.P. AP</td> <td colspan="2">45. DATE APPROVED</td> <td colspan="2">46. DATE APPROVED</td> <td colspan="2">47. DATE APPROVED</td> </tr> <tr> <td colspan="2">18422</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">Dec 62</td> </tr> </table>												19. TRANSFER CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEREST CODE	24. MOOTPS CODE	25. DATE OF BIRTH	26. DATE OF GRAD	27. DATE OF USL	10	10	28.100	ORR	750-13						28. DATE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/ANCELLATION DATA										EOD DATA		33. SET PREFERENCE		34. SERV. COMP. DATA		35. LONG. COMP. DATA		36. CARRIER CATEGORY		37. RECL. / M.R. / INSURANCE												38. PREVIOUS GOVERNMENT SERVICE DATA		39. MILITARY DATA		40. FEDERAL TAX DATA		41. STATE TAX DATA		42. SOCIAL SECURITY NO.												43. POSITION CONTROL CERTIFICATION		44. G.P. AP		45. DATE APPROVED		46. DATE APPROVED		47. DATE APPROVED		18422								Dec 62	
19. TRANSFER CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEREST CODE	24. MOOTPS CODE	25. DATE OF BIRTH	26. DATE OF GRAD	27. DATE OF USL																																																																																																						
10	10	28.100	ORR	750-13																																																																																																											
28. DATE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/ANCELLATION DATA																																																																																																							
								EOD DATA																																																																																																							
33. SET PREFERENCE		34. SERV. COMP. DATA		35. LONG. COMP. DATA		36. CARRIER CATEGORY		37. RECL. / M.R. / INSURANCE																																																																																																							
38. PREVIOUS GOVERNMENT SERVICE DATA		39. MILITARY DATA		40. FEDERAL TAX DATA		41. STATE TAX DATA		42. SOCIAL SECURITY NO.																																																																																																							
43. POSITION CONTROL CERTIFICATION		44. G.P. AP		45. DATE APPROVED		46. DATE APPROVED		47. DATE APPROVED																																																																																																							
18422								Dec 62																																																																																																							

SECRET
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle) <i>Bob Johnson</i>	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER <i>1-2-503</i>
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>1-1-62</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE <i>2 JUL 1962</i>		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

When Filled In:

DATE PREPARED
15 March 1961

1152

493

SECRET

23 FEB 1961

MEMORANDUM FOR: Director of Personnel

THROUGH: Chief, FS, DD/P

THROUGH: Assistant to the DD/I (Administration) *for S.*

SUBJECT: Promotion

SECRET

SUBJECT:

Promotion

CONCURRENCES:

3/1/61
Date

3/10/61
Date

SECRET

(When Filled In)

DATE PREPARED		REQUEST FOR PERSONNEL ACTION				V to V		V to UV			
Mo	Da	Yr					UV to V		UV to UV		
1. Serial No.		2. Name (Last-First-Middle)				3. Date of Birth		4. Ver. Prof.		5. See	
						Mo Da Yr		None-0 1-1 10-2		6. CS - EOD	
7. SCD		8. CSC Reinst.		9. CSC Or Other Legal Authority		10. Appt. Action		11. PEGLI		12. LCD	
Mo	Da	Yr	Yes-1 No-2	Code		Mo	Da	Yr	Yes-1 No-2	Code	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDI OPR						Wash., D.C.					
16. Dept. Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
DDI Field From		Identification Spec.				923-01		CS		1390-06	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11-2		7,270		TR		Mo Da Yr 10 20 57		Mo Da Yr 10 16 60		9 5700-20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment to Capital + Transfer g.m.h.		06		07 26 59		Regular		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
OFFICE OF DDI ERS STAFF Strategic Intelligence Staff				1825						37587	
33. Dept. Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
DDI Field From		I.O. Factory Mark				8-96					
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation	
11-2		7,270				Mo Da Yr 10 20 57		Mo Da Yr 10 16 60		75401 16	

SOURCE OF REQUEST

Please transfer from (numbered in unbroken) (unit on 30 July 1955. Subject to replace () who is returning to 31 unit. 1955.	
---	--

SECRET

SECRET

Change According To Circular

REQUEST FOR PERSONNEL ACTION												VOUCHERED	
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth		4. Ver. Pref.		5. Sex		6. CS. LOD	
						Mo Da Yr		None-0 Code 1 2 3 4 5 6 7 8 9 10 11 12		M F		Mo Da Yr	
7. SCD		8. CSC Refmt		9. CSC Or Other Legal Authority		10. Appt. Affidav		11. FEGLI		12. LCD		13. ...	
Mo Da Yr		Yes-1 Code No-2				Mo Da Yr		Yes-1 Code No-2		Mo Da Yr		Yes-1 Code No-2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Section Code	
DDI/Office of Research & Reports						Washington, D.C.					
16. Dept. Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. X Code Valid From		Identification Specialist				923.01		OS		1370.06	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grde		25. PSI Due		26. Appropriation Number	
9-2		\$ 5575.		IR		Mo Da Yr		Mo Da Yr		8-5709-20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Promotion				Mo Da Yr ACAP		Regular					

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Section Code	
DDI/Office of Research & Reports						Washington, D.C.					
33. Dept. Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. X Code Valid From		Identification Specialist				923.01		OS		1370.06	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grde		42. PSI Due		43. Appropriation Number	
11-1		\$ 6390.		IR		Mo Da Yr		Mo Da Yr		8-5709-20	

Comments	Signature	Date	Comments	Signature	Date
A. Career Board			D. Placement		
B. Pay. Control			E.		
C. Classification			F. Approved By		
<p>REMARKS</p> <p>11320</p>					

SECRET

CONFIDENTIAL

STANDARD FORM 52 PERSONNEL ACTION U.S. CIVIL SERVICE COMMISSION WASHINGTON, D.C. 20535 BUREAU OF PERSONNEL		21 JUN 1956 VOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr. XXXXXX One given name, initial(s), and surname)		2. DATE OF BIRTH	
3. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion		4. REQUEST NO. 5. EFFECTIVE DATE A. PROPOSED ASAP B. APPROVED	
6. POSITION (Specify whether establish, change grade or title, etc.)		7. C. S. OR OTHER LEGAL AUTHORITY	
FROM: 99(6)		TO: 99(6)	
8. POSITION TITLE AND NUMBER		9. SERVICE, GRADE, AND SALARY	
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS	
12. FIELD OR DEPARTMENTAL		13. FIELD OR DEPARTMENTAL	
14. REMARKS (Use reverse if necessary)		Complies with CIA Regulation 20-530	
15. VETERAN PREFERENCE			
16. POSITION CLASSIFICATION ACTION			
17. DATE OF APPOINTMENT			
18. DATE OF APPOINTMENT			
19. STANDARD FORM 50-16			
PERIODIC STEP INCREASE 17 JUN 56			
TO SALARY 3 44.00			
20. CLEARANCES			
21. DATE OF LAST POSITION			
22. CLASSIFICATION			
23. PLACEMENT CODE			

SECRET
SECURITY INFORMATION

ENTRANCE ON DUTY NOTICE		1. DATE
2. TO:	[Redacted]	22 June 1955
3. OFFICE (Division, Branch, Etc.)		DDI/CBR
4. THE INDIVIDUAL MEETS THE STANDARDS FOR EMPLOYMENT WITH THIS AGENCY SUBJECT TO THE TYPE OF CLEARANCE INDICATED IN ITEM NO. 9. THE SIGNED CLEARANCE FROM IAS FOR ENTRANCE ON DUTY HAS BEEN MADE A PART OF THE PERSONNEL FILE OF THIS INDIVIDUAL. HE/SHE IS REPORTING FOR DUTY THIS DATE.		
5. NAME	[Redacted]	6. JOB TITLE AND GRADE
7. EFFECTIVE DATE	15 June 1955	Ident. Spec. GS-7
10. REMARKS: (Include Medical or Other Limitations)		9. TYPE CLEARANCE
Subject to BOD, testing, 24 June 1955.		Provisional
DISTRIBUTION: ORIGINAL AND COPY (WHITE) TO ITEM NO. 3. COPY (PINK) TO PERSONNEL FOLDER. FORM NO. 37-114 PREVIOUS EDITIONS NOT TO BE USED 20V 1952		

SECRET

CONFIDENTIAL

DATE: JUN 9 1955

TO : Placement and Utilization Division, Personnel Office

FROM : Assistant Director, ORR

SUBJECT: [REDACTED]

The case of [REDACTED] [REDACTED] a
(provisionally) cleared applicant has been thoroughly reviewed
and this Office does guarantee that the position to which he
is to be assigned does fall within the personnel ceiling of
ORR. Therefore, it is requested that the above-named indi-
vidual be brought on duty as soon as possible.

FOR THE ASSISTANT DIRECTOR [REDACTED]

Chief, Administrative Staff, ORR

CONFIDENTIAL

CONFIDENTIAL

Office Memorandum • UNITED STATES GOVERNMENT

TO : Placement and Utilization Division, O/P

DATE: 21 April 1955

ATTN: [REDACTED]

FROM : Personnel Officer, OPR

SUBJECT: [REDACTED] - Request for Provisional Clearance

1. It is requested that a Provisional Clearance be granted for [REDACTED] to allow his entrance on duty at the earliest opportunity.

2. This Office is prepared to assign [REDACTED] to an unclassified project.

[REDACTED]

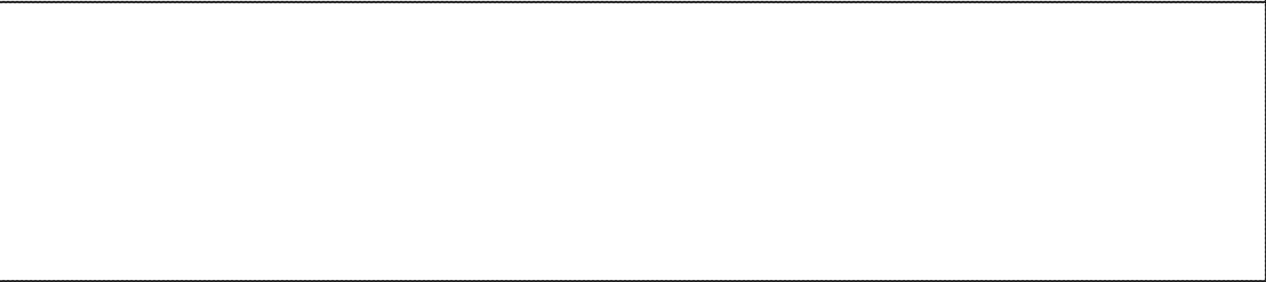
[REDACTED]

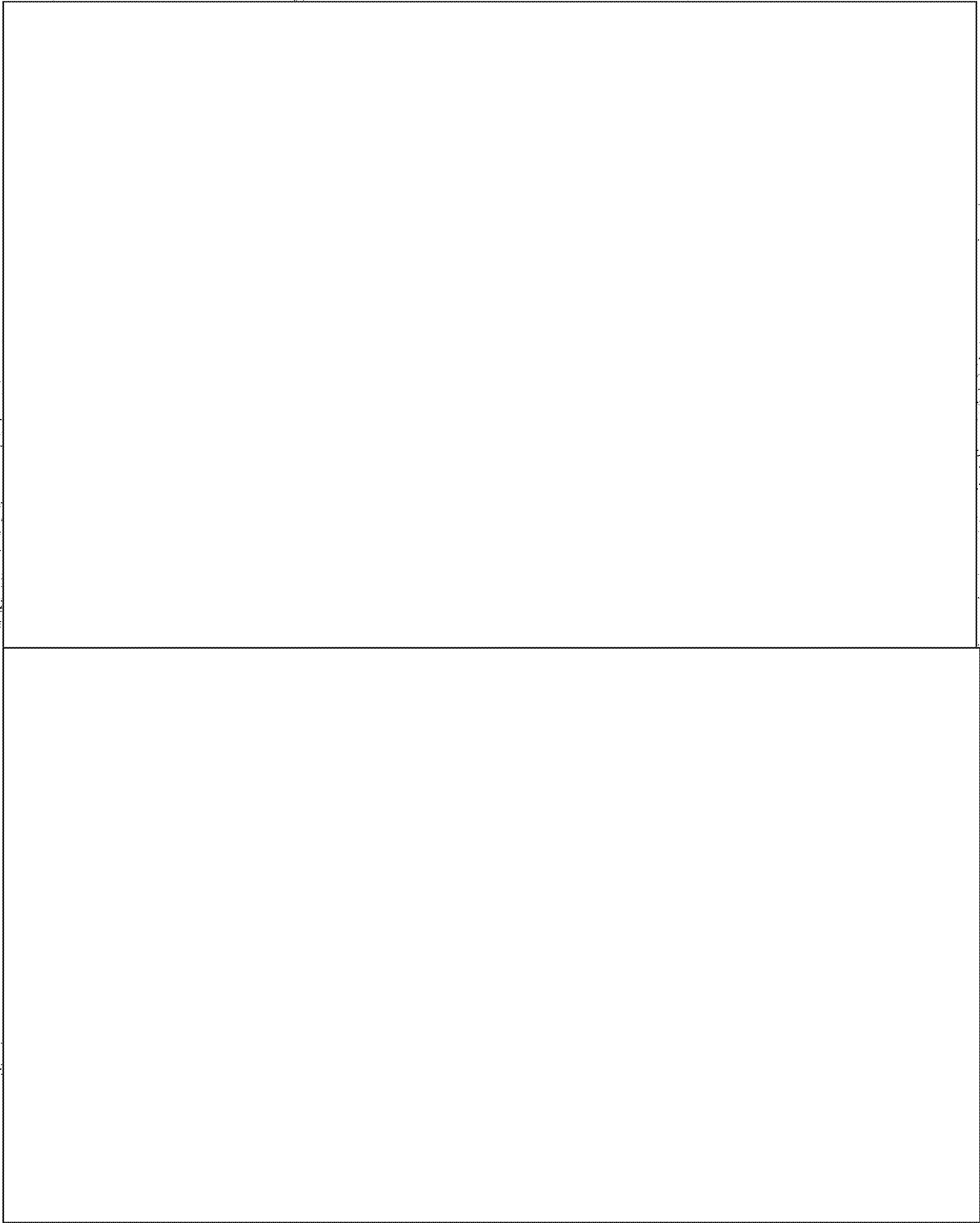
St/A/RR
[REDACTED]

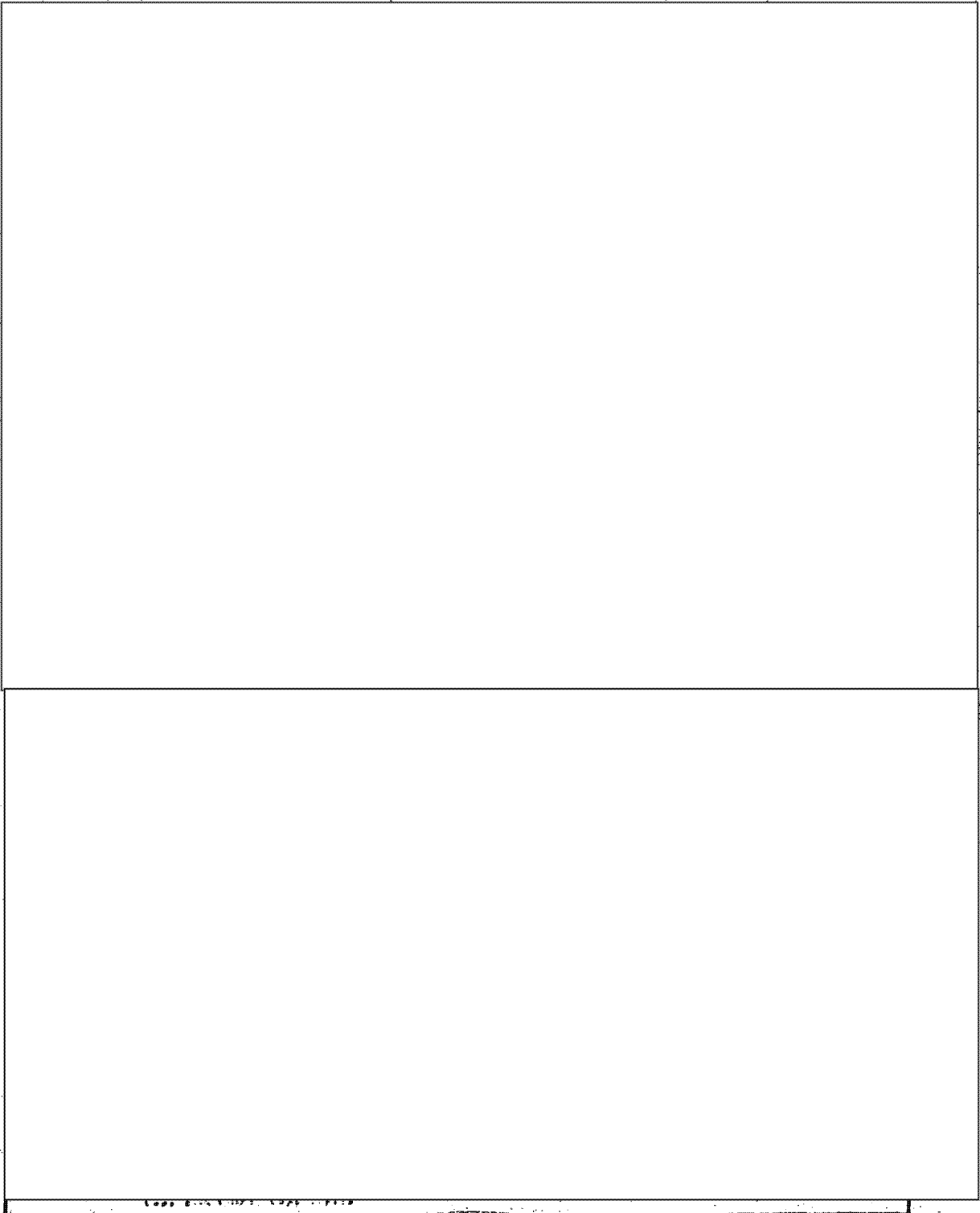
Distribution:

- 0 & 1 - Addressee
- 2 - St/A/RR
- 2 - AD/RR

CONFIDENTIAL





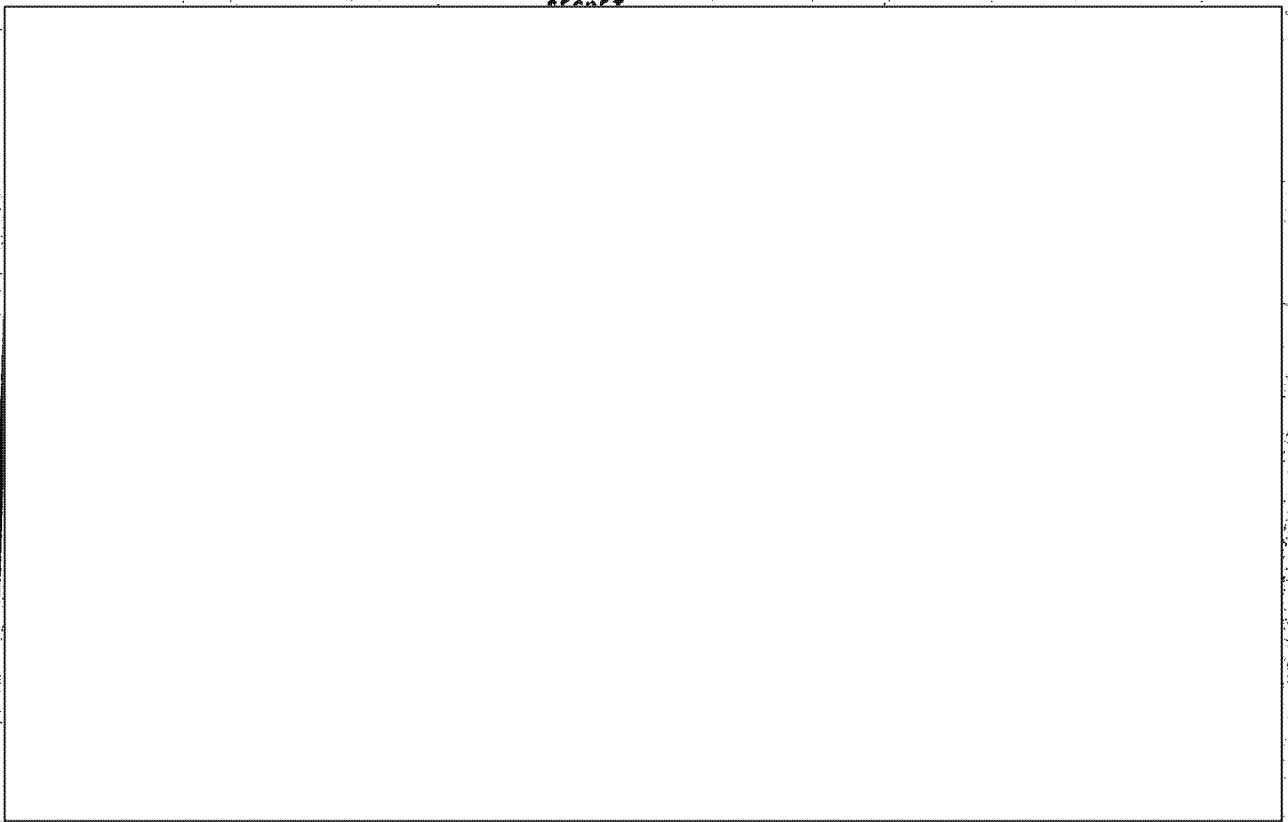


FORM 1551 MAY 1962 EDITION
GSA GEN. REG. NO. 27

U.S. GOVERNMENT PRINTING OFFICE: 1962

413-20-811

SECRET



14-00000
"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF
TITLE 5, U.S.C. AND EXECUTIVE ORDER 11611 PURSUANT TO AUTHORITY OF DCI
AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE
DATED 08 OCTOBER 1962."

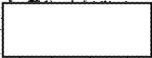
EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
	45 997	V		GS 13 6	\$25,451

SECRET

1 July 1959

File: K - 2303

MEMORANDUM FOR: Chief, Records and Services Division
Office of PersonnelSUBJECT: 

cc: SSB/OS

JUL 3 1959
SECRET
JUL 14 1959
1580a

(4-23-40)

14-00000

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

42371374

DLN: 28 MAY 75

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
3. TYPE OF PERSONNEL ACTION (RETIREMENT) (DISABILITY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM FROM CSI									
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
MO DA YR		REGULAR							
15 14 75									
6. FUNDS		7. FAN AND NSCA		8. CSC OR OTHER LEGAL AUTHORITY					
V TO V		V TO CF		Pl. 85-643 SECT 231					
CF TO V		CF TO CF							
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDO/EA DIVISION DEVELOPMENT COMPLEMENT					WASH., D.C.				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
OPS OFFICER					DCOF		DMG		
14. CLASSIFICATION SCHEDULE (GS, IB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			7136.01		13 6		25051		
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE	
15 14		4		NUMERIC ALPHABETIC					
24. MONTHS		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI			
Code		MO DA YR		MO DA YR		MO DA YR			
28. NFE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Continuation/Concomitant	
MO DA YR				1. CSC 2. CS 3. NONE		TYPE		MO DA	
33. VET PREFERENCE		34. SERV. COMP. DATE		35. LONG. COMP. DATE		36. CAREER CATEGORY		37. FEET	
CODE		MO DA YR		MO DA YR		SAB SERV CODE		CODE 0 1 100	
38. PREVIOUS CIVILIAN GOVERNMENT SERVICE		39. LEAVE CAT		40. FEDERAL TAX DATA		41. FORM EMPLOYED		42. TAX EXEMPTION	
CODE		CODE		CODE		CODE		CODE	
0. NO PREVIOUS SERVICE 1. NO REAR IN SERVICE 2. REAR IN SERVICE LESS THAN 3 YRS. 3. REAR IN SERVICE MORE THAN 3 YRS.		CODE		CODE		CODE		CODE	
SIGNATURE OR OTHER AUTHENTICATION									

PLN 85-1100
3 76 MAY 1975

1000 Form 100
1-68

SECRET

86G: 25 SEPT 74

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
EXTENDED SICK LEAVE - DISABILITY RETIREMENT NTE: 14 MAY 1975						09 06 74		REGULAR			
6. FUNDS		X		V TO V		V TO CF		7. PAN AND NSCA		8. CSC OR OTHER LEGAL AUTHORITY	
		CF TO V		CF TO CF		5237 1392 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATION						10. LOCATION OF OFFICIAL STATION					
DDO/EA DIVISION DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						9997		DMG			
14. CLASSIFICATION SCHEDULE (GS, LE, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		13 6		24122			
18. DATES:											
LWD: 06 SEPTEMBER 1974											
OTHER:											
HOME BASE: EA											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEREST CODE		24. MONTH CODE	
31		40		45997 EA		75013				1	
25. DATE OF BIRTH		26. DATE OF OFFICE		27. DATE OF LET		28. SECURITY		29. SEC		30. SEC	
05 14 75		SL				EOD DATA					
31. VET REFERENCE		32. VET COMP DATE		33. LONG COMP DATE		34. CAREER CATEGORY		35. HEALTH INSURANCE		36. SOCIAL SECURITY NO.	
37. PREVIOUS CIVILIAN GOVERNMENT SERVICE				38. LEAVE CAT CODE		39. FEDERAL TAX DATA		40. STATE TAX DATA			
41. NO PREVIOUS SERVICE				42. NO LEAVE CAT		43. NO FEDERAL TAX		44. NO STATE TAX			
45. NO PREVIOUS SERVICE				46. NO LEAVE CAT		47. NO FEDERAL TAX		48. NO STATE TAX			
49. NO PREVIOUS SERVICE				50. NO LEAVE CAT		51. NO FEDERAL TAX		52. NO STATE TAX			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 8/24/74 </div>											

DMS: 10 SEPT 74

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		MO DA YR 15 74	REGULAR
6. FUNDS	V TO V CF TO V	V TO CF CF TO CF	7. PAN AND NSCA
			8. CSC OR OTHER LEGAL AUTHORITY
		5237 1300 3011	51 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDO/LA DIVISION DEVELOPMENT COMPLEMENT		ASH., D.C.	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		2007	DNC
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	136.01	13 5	20122
18. REMARKS			
OTHER			
HOME BASE: EA			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
37	10	45007 EA	75013
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF CH	26. DATE OF CH
MO DA YR	MO DA YR	MO DA YR	MO DA YR
27. NIE EMPLOY	28. SPECIAL REFERENCE	29. RETIREMENT DATA	30. SEPARATION DATA CODE
MO DA YR	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12
31. VET PREFERENCE	32. SERV COMP DATE	33. LONG COMP DATE	34. CARRIER CATEGORY
CODE	MO DA YR	MO DA YR	CODE
35. PREVIOUS CIVILIAN GOVERNMENT SERVICE	36. LEAVE CAT CODE	37. FEDERAL TAX DATA	38. STATE TAX DATA
CODE	CODE	CODE	CODE
SIGNATURE FOR OTHER AUTHENTICATION			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED </div>			

SECRET
(When Filled In)

REF: 22 JAN 74

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		01 20 74	REGULAR
6. FUNDS	7. V TO V	8. V TO CF	9. CFC OR OTHER LEGAL AUTHORITY
X			
	C TO V	C TO CF	
10. ORGANIZATIONAL DESIGNATIONS		11. LOCATION OF OFFICIAL STATION	
DDG/EA DIVISION		WASH. D.C.	
12. POSITION TITLE		13. POSITION NUMBER	14. SERVICE DESIGNATION
OPS OFFICER		11408	D
15. CLASSIFICATION SCHEDULE (GS, IS, ON)	16. OCCUPATIONAL SERIES	17. GRADE AND STEP	18. SALARY OR RATE
GS	0136.01	13 6	24122
19. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
20. AGENCY CODE	21. EMPLOY CODE	22. OFFICE CODE	23. STATION CODE
37	10	45020	EA
24. DATE OF BIRTH	25. DATE OF LEAVE	26. DATE OF DEATH	27. DATE OF RETIREMENT
28. SPECIAL REFERENCE	29. RETIREMENT DATA	30. SEPARATION DATA CODE	31. SEPARATION DATE
32. PREFERENCE	33. SERV COMP DATE	34. USNS COMP DATE	35. CARRIED CATEGORY
36. PREVIOUS GOVERNMENT SERVICE	37. LEAVE CAT CODE	38. REEMPLOY DATA	39. SOCIAL SECURITY NO.
SIGNATURE OR OTHER AUTHENTICATION		FOI-D 006-12574	

Form 100-100
1-74Use Form 100-1
1-74

SECRET

U.S. GOVERNMENT PRINTING OFFICE

U.S. GPO: 1974-0-250-000

F-7108

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOUSE	
				45443		CP			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	SI	ARI
GS	13	23433	10/17/73	GS	13	24122	10/14/73		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				10/16/73					
<input type="checkbox"/> NO EXCESS SWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS				NOTED BY					
151				WOB					
PAY CHANGE NOTIFICATION									
(4-51)									

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	ON-STEP	NEW SALARY
	V	GS	13	5	241,423

KHN: 15 OCT 73

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																													
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)																											
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					4. EFFECTIVE DATE 10 14 73		5. CATEGORY OF EMPLOYMENT REGULAR																						
6. FUNDS		7. PAY AND REPA		8. CSC OR OTHER LEGAL AUTHORITY																									
<input checked="" type="checkbox"/> V TO V <input checked="" type="checkbox"/> CF TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO CF		4237 1374 0000		50 USC 403 J																									
9. ORGANIZATIONAL DESIGNATIONS DOO/EA DIVISION					10. LOCATION OF OFFICIAL STATION WASH., D.C.																								
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER 4024		13. SERVICE DESIGNATION D																						
14. CLASSIFICATION SCHEDULE (GS 15 etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 6		17. SALARY OR RATE 24122																						
18. REMARKS																													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL <table border="1"> <tr> <td>19. ACTION CODE 16</td> <td>20. NO. 1 CODE 10</td> <td>21. OFFICE CODE 45140</td> <td>22. DIVISION CODE EA</td> <td>23. POSITION CODE 75013</td> <td>24. PAY CODE 1</td> <td>25. DATE OF GRANT 10 14 73</td> <td>26. DATE OF GRANT 10 14 73</td> <td>27. DATE OF GRANT 10 14 73</td> <td>28. DATE OF GRANT 10 14 73</td> </tr> <tr> <td>29. DATE OF GRANT 10 14 73</td> <td>30. DATE OF GRANT 10 14 73</td> <td>31. DATE OF GRANT 10 14 73</td> <td>32. DATE OF GRANT 10 14 73</td> <td>33. DATE OF GRANT 10 14 73</td> <td>34. DATE OF GRANT 10 14 73</td> <td>35. DATE OF GRANT 10 14 73</td> <td>36. DATE OF GRANT 10 14 73</td> <td>37. DATE OF GRANT 10 14 73</td> <td>38. DATE OF GRANT 10 14 73</td> </tr> </table>										19. ACTION CODE 16	20. NO. 1 CODE 10	21. OFFICE CODE 45140	22. DIVISION CODE EA	23. POSITION CODE 75013	24. PAY CODE 1	25. DATE OF GRANT 10 14 73	26. DATE OF GRANT 10 14 73	27. DATE OF GRANT 10 14 73	28. DATE OF GRANT 10 14 73	29. DATE OF GRANT 10 14 73	30. DATE OF GRANT 10 14 73	31. DATE OF GRANT 10 14 73	32. DATE OF GRANT 10 14 73	33. DATE OF GRANT 10 14 73	34. DATE OF GRANT 10 14 73	35. DATE OF GRANT 10 14 73	36. DATE OF GRANT 10 14 73	37. DATE OF GRANT 10 14 73	38. DATE OF GRANT 10 14 73
19. ACTION CODE 16	20. NO. 1 CODE 10	21. OFFICE CODE 45140	22. DIVISION CODE EA	23. POSITION CODE 75013	24. PAY CODE 1	25. DATE OF GRANT 10 14 73	26. DATE OF GRANT 10 14 73	27. DATE OF GRANT 10 14 73	28. DATE OF GRANT 10 14 73																				
29. DATE OF GRANT 10 14 73	30. DATE OF GRANT 10 14 73	31. DATE OF GRANT 10 14 73	32. DATE OF GRANT 10 14 73	33. DATE OF GRANT 10 14 73	34. DATE OF GRANT 10 14 73	35. DATE OF GRANT 10 14 73	36. DATE OF GRANT 10 14 73	37. DATE OF GRANT 10 14 73	38. DATE OF GRANT 10 14 73																				
SIGNATURE OF OFFICIAL AUTHORIZING ACTION <div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10 14 73 WASH 10 16 73 </div>																													

FORM 1-73
10-73

USE PREVIOUS EDITIONS

SECRET

FORM 1-73

10-73

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER
11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME

SERIAL

ORGN. FUNDS GR-STEP

45 440 CF GS 13 5

NEW
SALARY

\$22,328

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

[illegible]

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
[REDACTED]	[REDACTED]	45	440	CF GS 13 5	\$21,237

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
				45 440		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	ST	ADJ.
GS 13	4	\$19,537	10/19/69	GS 13	5	\$20,125	10/17/71		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
[REDACTED]				[REDACTED]					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLASS INITIALS				AUTHOR BY					
[REDACTED]				[REDACTED]					
FORM 360 E PAY CHANGE NOTIFICATION									

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND
EXECUTIVE ORDER 11976 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME

[REDACTED]

SERIAL ORGN. FUNDS GR-STEP

[REDACTED]

49 440 CF GS 13 4

NEW
SALARY

\$19,537

SECRET

(When Filled In)

SEP 1 1976

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. ACTION OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		08 21 76	REGULAR
6. FUNDS	7. Financial Analysis Fee Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
V TO V CF TO V- X	V TO CF CF TO CF	1137-1633-6000	50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/FE			
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		1915	D
14. CLASSIFICATION SCHEDULE (GS, IS, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	(136.0)	13-4	15437
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. OFFICE CODE	21. ACTION CODE	22. ACTION CODE
37	10	45440	FE
23. ACTION CODE	24. ACTION CODE	25. ACTION CODE	26. ACTION CODE
37	10	45440	FE
27. ACTION CODE	28. ACTION CODE	29. ACTION CODE	30. ACTION CODE
37	10	45440	FE
31. ACTION CODE	32. ACTION CODE	33. ACTION CODE	34. ACTION CODE
37	10	45440	FE
35. ACTION CODE	36. ACTION CODE	37. ACTION CODE	38. ACTION CODE
37	10	45440	FE
39. ACTION CODE	40. ACTION CODE	41. ACTION CODE	42. ACTION CODE
37	10	45440	FE
43. ACTION CODE	44. ACTION CODE	45. ACTION CODE	46. ACTION CODE
37	10	45440	FE
47. ACTION CODE	48. ACTION CODE	49. ACTION CODE	50. ACTION CODE
37	10	45440	FE
51. ACTION CODE	52. ACTION CODE	53. ACTION CODE	54. ACTION CODE
37	10	45440	FE
55. ACTION CODE	56. ACTION CODE	57. ACTION CODE	58. ACTION CODE
37	10	45440	FE
59. ACTION CODE	60. ACTION CODE	61. ACTION CODE	62. ACTION CODE
37	10	45440	FE
63. ACTION CODE	64. ACTION CODE	65. ACTION CODE	66. ACTION CODE
37	10	45440	FE
67. ACTION CODE	68. ACTION CODE	69. ACTION CODE	70. ACTION CODE
37	10	45440	FE
71. ACTION CODE	72. ACTION CODE	73. ACTION CODE	74. ACTION CODE
37	10	45440	FE
75. ACTION CODE	76. ACTION CODE	77. ACTION CODE	78. ACTION CODE
37	10	45440	FE
79. ACTION CODE	80. ACTION CODE	81. ACTION CODE	82. ACTION CODE
37	10	45440	FE
83. ACTION CODE	84. ACTION CODE	85. ACTION CODE	86. ACTION CODE
37	10	45440	FE
87. ACTION CODE	88. ACTION CODE	89. ACTION CODE	90. ACTION CODE
37	10	45440	FE
91. ACTION CODE	92. ACTION CODE	93. ACTION CODE	94. ACTION CODE
37	10	45440	FE
95. ACTION CODE	96. ACTION CODE	97. ACTION CODE	98. ACTION CODE
37	10	45440	FE
99. ACTION CODE	100. ACTION CODE	101. ACTION CODE	102. ACTION CODE
37	10	45440	FE
103. ACTION CODE	104. ACTION CODE	105. ACTION CODE	106. ACTION CODE
37	10	45440	FE
107. ACTION CODE	108. ACTION CODE	109. ACTION CODE	110. ACTION CODE
37	10	45440	FE
111. ACTION CODE	112. ACTION CODE	113. ACTION CODE	114. ACTION CODE
37	10	45440	FE
115. ACTION CODE	116. ACTION CODE	117. ACTION CODE	118. ACTION CODE
37	10	45440	FE
119. ACTION CODE	120. ACTION CODE	121. ACTION CODE	122. ACTION CODE
37	10	45440	FE
123. ACTION CODE	124. ACTION CODE	125. ACTION CODE	126. ACTION CODE
37	10	45440	FE
127. ACTION CODE	128. ACTION CODE	129. ACTION CODE	130. ACTION CODE
37	10	45440	FE
131. ACTION CODE	132. ACTION CODE	133. ACTION CODE	134. ACTION CODE
37	10	45440	FE
135. ACTION CODE	136. ACTION CODE	137. ACTION CODE	138. ACTION CODE
37	10	45440	FE
139. ACTION CODE	140. ACTION CODE	141. ACTION CODE	142. ACTION CODE
37	10	45440	FE
143. ACTION CODE	144. ACTION CODE	145. ACTION CODE	146. ACTION CODE
37	10	45440	FE
147. ACTION CODE	148. ACTION CODE	149. ACTION CODE	150. ACTION CODE
37	10	45440	FE
151. ACTION CODE	152. ACTION CODE	153. ACTION CODE	154. ACTION CODE
37	10	45440	FE
155. ACTION CODE	156. ACTION CODE	157. ACTION CODE	158. ACTION CODE
37	10	45440	FE
159. ACTION CODE	160. ACTION CODE	161. ACTION CODE	162. ACTION CODE
37	10	45440	FE
163. ACTION CODE	164. ACTION CODE	165. ACTION CODE	166. ACTION CODE
37	10	45440	FE
167. ACTION CODE	168. ACTION CODE	169. ACTION CODE	170. ACTION CODE
37	10	45440	FE
171. ACTION CODE	172. ACTION CODE	173. ACTION CODE	174. ACTION CODE
37	10	45440	FE
175. ACTION CODE	176. ACTION CODE	177. ACTION CODE	178. ACTION CODE
37	10	45440	FE
179. ACTION CODE	180. ACTION CODE	181. ACTION CODE	182. ACTION CODE
37	10	45440	FE
183. ACTION CODE	184. ACTION CODE	185. ACTION CODE	186. ACTION CODE
37	10	45440	FE
187. ACTION CODE	188. ACTION CODE	189. ACTION CODE	190. ACTION CODE
37	10	45440	FE
191. ACTION CODE	192. ACTION CODE	193. ACTION CODE	194. ACTION CODE
37	10	45440	FE
195. ACTION CODE	196. ACTION CODE	197. ACTION CODE	198. ACTION CODE
37	10	45440	FE
199. ACTION CODE	200. ACTION CODE	201. ACTION CODE	202. ACTION CODE
37	10	45440	FE
203. ACTION CODE	204. ACTION CODE	205. ACTION CODE	206. ACTION CODE
37	10	45440	FE
207. ACTION CODE	208. ACTION CODE	209. ACTION CODE	210. ACTION CODE
37	10	45440	FE
211. ACTION CODE	212. ACTION CODE	213. ACTION CODE	214. ACTION CODE
37	10	45440	FE
215. ACTION CODE	216. ACTION CODE	217. ACTION CODE	218. ACTION CODE
37	10	45440	FE
219. ACTION CODE	220. ACTION CODE	221. ACTION CODE	222. ACTION CODE
37	10	45440	FE
223. ACTION CODE	224. ACTION CODE	225. ACTION CODE	226. ACTION CODE
37	10	45440	FE
227. ACTION CODE	228. ACTION CODE	229. ACTION CODE	230. ACTION CODE
37	10	45440	FE
231. ACTION CODE	232. ACTION CODE	233. ACTION CODE	234. ACTION CODE
37	10	45440	FE
235. ACTION CODE	236. ACTION CODE	237. ACTION CODE	238. ACTION CODE
37	10	45440	FE
239. ACTION CODE	240. ACTION CODE	241. ACTION CODE	242. ACTION CODE
37	10	45440	FE
243. ACTION CODE	244. ACTION CODE	245. ACTION CODE	246. ACTION CODE
37	10	45440	FE
247. ACTION CODE	248. ACTION CODE	249. ACTION CODE	250. ACTION CODE
37	10	45440	FE
251. ACTION CODE	252. ACTION CODE	253. ACTION CODE	254. ACTION CODE
37	10	45440	FE
255. ACTION CODE	256. ACTION CODE	257. ACTION CODE	258. ACTION CODE
37	10	45440	FE
259. ACTION CODE	260. ACTION CODE	261. ACTION CODE	262. ACTION CODE
37	10	45440	FE
263. ACTION CODE	264. ACTION CODE	265. ACTION CODE	266. ACTION CODE
37	10	45440	FE
267. ACTION CODE	268. ACTION CODE	269. ACTION CODE	270. ACTION CODE
37	10	45440	FE
271. ACTION CODE	272. ACTION CODE	273. ACTION CODE	274. ACTION CODE
37	10	45440	FE
275. ACTION CODE	276. ACTION CODE	277. ACTION CODE	278. ACTION CODE
37	10	45440	FE
279. ACTION CODE	280. ACTION CODE	281. ACTION CODE	282. ACTION CODE
37	10	45440	FE
283. ACTION CODE	284. ACTION CODE	285. ACTION CODE	286. ACTION CODE
37	10	45440	FE
287. ACTION CODE	288. ACTION CODE	289. ACTION CODE	290. ACTION CODE
37	10	45440	FE
291. ACTION CODE	292. ACTION CODE	293. ACTION CODE	294. ACTION CODE
37	10	45440	FE
295. ACTION CODE	296. ACTION CODE	297. ACTION CODE	298. ACTION CODE
37	10	45440	FE
299. ACTION CODE	300. ACTION CODE	301. ACTION CODE	302. ACTION CODE
37	10	45440	FE
303. ACTION CODE	304. ACTION CODE	305. ACTION CODE	306. ACTION CODE
37	10	45440	FE
307. ACTION CODE	308. ACTION CODE	309. ACTION CODE	310. ACTION CODE
37	10	45440	FE
311. ACTION CODE	312. ACTION CODE	313. ACTION CODE	314. ACTION CODE
37	10	45440	FE
315. ACTION CODE	316. ACTION CODE	317. ACTION CODE	318. ACTION CODE
37	10	45440	FE
319. ACTION CODE	320. ACTION CODE	321. ACTION CODE	322. ACTION CODE
37	10	45440	FE
323. ACTION CODE	324. ACTION CODE	325. ACTION CODE	326. ACTION CODE
37	10	45440	FE
327. ACTION CODE	328. ACTION CODE	329. ACTION CODE	330. ACTION CODE
37	10	45440	FE
331. ACTION CODE	332. ACTION CODE	333. ACTION CODE	334. ACTION CODE
37	10	45440	FE
335. ACTION CODE	336. ACTION CODE	337. ACTION CODE	338. ACTION CODE
37	10	45440	FE
339. ACTION CODE	340. ACTION CODE	341. ACTION CODE	342. ACTION CODE
37	10	45440	FE
343. ACTION CODE	344. ACTION CODE	345. ACTION CODE	346. ACTION CODE
37	10	45440	FE
347. ACTION CODE	348. ACTION CODE	349. ACTION CODE	350. ACTION CODE
37	10	45440	FE
351. ACTION CODE	352. ACTION CODE	353. ACTION CODE	354. ACTION CODE
37	10	45440	FE
355. ACTION CODE	356. ACTION CODE	357. ACTION CODE	358. ACTION CODE
37	10	45440	FE
359. ACTION CODE	360. ACTION CODE	361. ACTION CODE	362. ACTION CODE
37	10	45440	FE
363. ACTION CODE	364. ACTION CODE	365. ACTION CODE	366. ACTION CODE
37	10	45440	FE
367. ACTION CODE	368. ACTION CODE	369. ACTION CODE	370. ACTION CODE
37	10	45440	FE
371. ACTION CODE	372. ACTION CODE	373. ACTION CODE	374. ACTION CODE
37	10	45440	FE
375. ACTION CODE	376. ACTION CODE	377. ACTION CODE	378. ACTION CODE
37	10	45440	FE
379. ACTION CODE	380. ACTION CODE	381. ACTION CODE	382. ACTION CODE
37	10	45440	FE
383. ACTION CODE	384. ACTION CODE	385. ACTION CODE	386. ACTION CODE
37	10	45440	FE
387. ACTION CODE	388. ACTION CODE	389. ACTION CODE	390. ACTION CODE
37	10	45440	FE
391. ACTION CODE	392. ACTION CODE	393. ACTION CODE	394. ACTION CODE
37	10	45440	FE
395. ACTION CODE	396. ACTION CODE	397. ACTION CODE	398. ACTION CODE
37	10	45440	FE
399. ACTION CODE	400. ACTION CODE	401. ACTION CODE	402. ACTION CODE
37	10	45440	FE
403. ACTION CODE	404. ACTION CODE	405. ACTION CODE	406. ACTION CODE
37	10	45440	FE
407. ACTION CODE	408. ACTION CODE	409. ACTION CODE	410. ACTION CODE
37	10	45440	FE
411. ACTION CODE	412. ACTION CODE	413. ACTION CODE	414. ACTION CODE
37	10	45440	FE
415. ACTION CODE	416. ACTION CODE	417. ACTION CODE	418. ACTION CODE
37	10	45440	FE
419. ACTION CODE	420. ACTION CODE	421. ACTION CODE	422. ACTION CODE
37	10	45440	FE
423. ACTION CODE	424. ACTION CODE	425. ACTION CODE	426. ACTION CODE
37	10	45440	FE
427. ACTION CODE	428. ACTION CODE	429. ACTION CODE	430. ACTION CODE
37	10	45440	FE
431. ACTION CODE	432. ACTION CODE	433. ACTION CODE	434. ACTION CODE
37	10	45440	FE
435. ACTION CODE	436. ACTION CODE	437. ACTION CODE	438. ACTION CODE
37	10	45440	FE
439. ACTION CODE	440. ACTION CODE	441. ACTION CODE	442. ACTION CODE
37	10	45440	FE
443. ACTION CODE	444. ACTION CODE	445. ACTION CODE	446. ACTION CODE
37	10	45440	FE
447. ACTION CODE	448. ACTION CODE	449. ACTION CODE	450. ACTION CODE
37	10	45440	FE
451. ACTION CODE	452. ACTION CODE	453. ACTION CODE	454. ACTION CODE
37	10	45440	FE
455. ACTION CODE	456. ACTION CODE	457. ACTION CODE	458. ACTION CODE
37	10	45440	FE
459. ACTION CODE	460. ACTION CODE	461. ACTION CODE	462. ACTION CODE
37	10	45440	FE
463. ACTION CODE	464. ACTION CODE	465. ACTION CODE	466. ACTION CODE
37	10	45440	FE
467. ACTION CODE	468. ACTION CODE	469. ACTION CODE	470. ACTION CODE
37	10	45440	FE
471. ACTION CODE	472. ACTION CODE	473. ACTION CODE	474. ACTION CODE
37	10	45440	FE
475. ACTION CODE	476. ACTION CODE	477. ACTION CODE	478. ACTION CODE
37	10	45440	FE
479. ACTION CODE	480. ACTION CODE	481. ACTION CODE	482. ACTION CODE
37	10	45440	FE
483. ACTION CODE	484. ACTION CODE	485. ACTION CODE	486. ACTION CODE
37	10	45440	FE
487. ACTION CODE	488. ACTION CODE	489. ACTION CODE	490. ACTION CODE
37	10	45440	FE
491. ACTION CODE	492. ACTION CODE	493. ACTION CODE	494. ACTION CODE
37	10	45440	FE
495. ACTION CODE	496. ACTION CODE	497. ACTION CODE	498. ACTION CODE
37	10	45440	FE
499. ACTION CODE	500. ACTION CODE	501. ACTION CODE	502. ACTION CODE
37	10	45440	FE
503. ACTION CODE	504. ACTION CODE	505. ACTION CODE	506. ACTION CODE
37			

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
[REDACTED]	[REDACTED]	45	440	CF GS 13 4	\$18,497

F22

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
[REDACTED]		[REDACTED]		45 440		CF			
OLD SALARY RATE				NEW SALARY RATE				6. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	IN	ADJ
GS 13	3	\$16,065	10/20/68	GS 13	4	\$17,393	10/19/69		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE [REDACTED]				DATE 6 OCT 69					
<input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> EXCESS DATES AT END OF WAITING PERIOD									
SUPERVISOR'S INITIALS [REDACTED]				2 776					
PAF CHANGE NOTIFICATION [REDACTED]									

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
[REDACTED]	[REDACTED]	45	440	CF GS 13 3	\$16,866

SECRET

(When Filled In)

FV01: 2 MAY 69

NOTIFICATION OF PERSONNEL ACTION

OCL

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
[REDACTED]			
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		05 02 69	REGULAR
6. FUNDS	V TO V	V TO CF	7. Financial Analyst No. Chargeable
CF TO V	X	CF TO CF	8. CSC OF OTHER LEGAL AUTHORITY
		9137 1039 0000	50 USC 403 J
9. OPERATIONAL DEMONSTRATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/FE		[REDACTED]	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		4947	0
14. CLASSIFICATION SCHEDULE (GS 18-46)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0135.01	13 3	15369
18. REMARKS			
HOME BASE: FE			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE
37	10	45440 FE	57557
23. INTEGRITY CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE
3			
27. DATE OF 1ST	28. SECURITY RTO NO	29. SECURITY RTO NO	30. SECURITY RTO NO
31. VET PREFERENCE	32. SERV COMP DATE	33. JORD COMP DATE	34. CARRIER CATEGORY
35. FEDERAL TAX DATA	36. STATE TAX DATA	37. SOCIAL SECURITY NO	38. SOCIAL SECURITY NO
SIGNATURE OF OTHER AUTHENTICATION			

 11-00
 11-00
 11-00

 Use Previous
 11-00

SECRET

SF

POSTED

 11-00
 11-00
 11-00

SECRET
(When Filled In)

JLB: 14 APR 69

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CONVERSION				04 1 06 63		REGULAR					
6. FUNDS		V TO V		V TO CF		7. FUNDING AGENCY NO. CHARGED		8. CMC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		9137 1275 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/FE						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATIONS			
OPS OFFICER						4024		D			
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136, 01		13 3		15863			
18. REMARKS											
WASH., D.C.											
HOME BASE: FE											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE (HUMAN RESOURCES)		22. CLASSICAL CODE	23. PUBLIC CODE	24. POSITION CODE	25. DATE OF ACTION		26. DATE OF ACTION		27. DATE OF ACTION
56	10	45140 FE		75013							
28. NTS LINES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CURRENT EDUCATIONAL DATA		33. SERVICE RECORD DATA	
										EOD DATA	
34. VET PREFERENCE		35. VET COMP DATE		36. VET COMP DATE		37. CAREER CATEGORY		38. HEALTH INSURANCE		39. SOCIAL SECURITY NO.	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE				41. LEAVE PAY CODE		42. PREPARATION DATA		43. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											

NOV 68 1150
3-63 304 10 67

Use Previous
Form

SECRET

PLW

POSTED
11-14-69
14-10
11-14-69
11-14-69

SDF: 7 NOV 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

NDF

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
[REDACTED]		[REDACTED]	
3. ACTION OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
PROMOTION		MO DA YR 10 20 63	REGULAR
6. FUNDS	V TO V CF TO V	V TO CF CF TO CF	7. Financial Analysis No. Chargeable 9137 1375 0000
8. ORGANIZATIONAL DESIGNATIONS		9. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
DDP/FE [REDACTED]		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION/TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		4024	0
14. CLASSIFICATION SCHEDULE (OS, LS, RL)	15. OCCASIONAL RATE	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	15 5 13 3	13330 15369
18. REMARKS WASH., D.C.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
22	10	05140 EC	75013
23. INTEGRITY CODE	24. MAJOR CODE	25. DATE OF BIRTH	26. DATE OF GRADE
S	1	MO DA YR [REDACTED]	MO DA YR 10 20 68
27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF BIRTH	30. DATE OF GRADE
MO DA YR 10 20 68	MO DA YR 10 20 68	MO DA YR 10 20 68	MO DA YR 10 20 68
31. SECURITY REQ NO.	32. SECURITY REQ NO.	33. SECURITY REQ NO.	34. SECURITY REQ NO.
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY
CODE	MO DA YR	MO DA YR	CODE
39. PREVIOUS CIVILIAN GOVERNMENT SERVICE	40. LEAVE CAT. CODE	41. FEDERAL TAX DATA	42. STATE TAX DATA
CODE	CODE	CODE	CODE

SIGNATURE OR OTHER AUTHENTICATION

POSTED

11-9-62

FORM 1150
3-62 May 70-67Use Previous
Edition

SECRET

JLB

Excluded from automatic
downgrading and
declassification

(When Filled In)

JLB: 17N MAY 68

SECRET
(When Filled In)

ODF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

REASSIGNMENT

4. EFFECTIVE DATE

5. CATEGORY OF EMPLOYMENT

05 19 68

REGULAR

6. FUNDS

V TO V

V TO CF

CF TO V

CF TO CF

9. ORGANIZATIONAL DESIGNATIONS

7. Financial Analysis No. Chargeable

8. CSC OR OTHER LEGAL AUTHORITY

8137 1375 0000

50 USC 403 J

10. LOCATION OF OFFICIAL STATION

DDP/FE

11. POSITION TITLE

WASH., D.C.

OPS OFFICER

12. POSITION NUMBER

13. SERVICE DESIGNATION

4025

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

GS

0136.01

05 5

12 5

12604

12989

18. REMARKS

WASH., D.C.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGREE CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	45140 FE	75013	S	I			
28. PTE EMPLOY	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION / CORRECTION DATA	33. SECURITY REQ. NO.	34. SEP		
					EOD DATA			
35. VI: PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					

SIGNATURE OR OTHER AUTHENTICATION

POSTED

EXAMINED - CIVILIAN GOVERNMENT SERVICE
EXAMINED - MILITARY SERVICE
EXAMINED - OTHER SERVICE

(When Filled In)

SECRET

PLW

FORM 150
Rev. 10-67Use Previous
Edition

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
		45	997	CF GS 12 5	\$12,443	\$12,989

FVU: 1 APR 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST FIRST MIDDLE)

3. NATURE OF PERSONNEL ACTION

SUSPENSION FOR THREE WORKING DAYS

4. EFFECTIVE DATE

04 01 68

5. CATEGORY OF EMPLOYMENT

REGULAR

A. FUNDS

V TO V

V TO CF

CF TO V

CF TO CF

7. Financial Analysis No. Chargeable

0137 1375 0000

8. CSC OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATION

ODP/FE
DEVELOPMENT COMPLEMENT

10. LOCATION OF OFFICIAL STATION

WASH., D.C.

11. POSITION TITLE

CPS OFFICER

12. POSITION NUMBER

0997

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LS, etc.)

FSR

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

05 5

12 5

17. SALARY OR RATE

12604

12969

18. REMARKS

SUSPENDED FOR THREE WORKING DAYS FOR INFRACTION OF AGENCY PHYSICAL SECURITY REGULATIONS. TO RETURN TO DUTY EOS 4 APRIL 1968. EMPLOYEE IS WARNED THAT FURTHER VIOLATIONS WILL BE VIEWED WITH EXTREME SERIOUSNESS.

OTHER

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE (1) NUMBER (2) ALPHABETIC	22. STATION CODE	23. INTEGRAL CODE	24. MAJOR CODE	25. DATE OF BIRTH (1) MO (2) DA (3) YR	26. DATE OF GRADE (1) MO (2) DA (3) YR	27. DATE OF LEI (1) MO (2) DA (3) YR
28. INT. EXPIRES (1) MO (2) DA (3) YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA (1) CSC (2) FSA (3) FGA (4) FIA (5) FJA (6) FKA (7) FLA (8) FMA (9) FPA (10) FRA (11) FSA (12) FTA (13) FKA (14) FLA (15) FMA (16) FPA (17) FRA (18) FSA (19) FTA (20) FKA (21) FLA (22) FMA (23) FPA (24) FRA (25) FSA (26) FTA (27) FKA (28) FLA (29) FMA (30) FPA (31) FRA (32) FSA (33) FTA (34) FKA (35) FLA (36) FMA (37) FPA (38) FRA (39) FSA (40) FTA (41) FKA (42) FLA (43) FMA (44) FPA (45) FRA (46) FSA (47) FTA (48) FKA (49) FLA (50) FMA (51) FPA (52) FRA (53) FSA (54) FTA (55) FKA (56) FLA (57) FMA (58) FPA (59) FRA (60) FSA (61) FTA (62) FKA (63) FLA (64) FMA (65) FPA (66) FRA (67) FSA (68) FTA (69) FKA (70) FLA (71) FMA (72) FPA (73) FRA (74) FSA (75) FTA (76) FKA (77) FLA (78) FMA (79) FPA (80) FRA (81) FSA (82) FTA (83) FKA (84) FLA (85) FMA (86) FPA (87) FRA (88) FSA (89) FTA (90) FKA (91) FLA (92) FMA (93) FPA (94) FRA (95) FSA (96) FTA (97) FKA (98) FLA (99) FMA (100) FPA (101) FRA (102) FSA (103) FTA (104) FKA (105) FLA (106) FMA (107) FPA (108) FRA (109) FSA (110) FTA (111) FKA (112) FLA (113) FMA (114) FPA (115) FRA (116) FSA (117) FTA (118) FKA (119) FLA (120) FMA (121) FPA (122) FRA (123) FSA (124) FTA (125) FKA (126) FLA (127) FMA (128) FPA (129) FRA (130) FSA (131) FTA (132) FKA (133) FLA (134) FMA (135) FPA (136) FRA (137) FSA (138) FTA (139) FKA (140) FLA (141) FMA (142) FPA (143) FRA (144) FSA (145) FTA (146) FKA (147) FLA (148) FMA (149) FPA (150) FRA (151) FSA (152) FTA (153) FKA (154) FLA (155) FMA (156) FPA (157) FRA (158) FSA (159) FTA (160) FKA (161) FLA (162) FMA (163) FPA (164) FRA (165) FSA (166) FTA (167) FKA (168) FLA (169) FMA (170) FPA (171) FRA (172) FSA (173) FTA (174) FKA (175) FLA (176) FMA (177) FPA (178) FRA (179) FSA (180) FTA (181) FKA (182) FLA (183) FMA (184) FPA (185) FRA (186) FSA (187) FTA (188) FKA (189) FLA (190) FMA (191) FPA (192) FRA (193) FSA (194) FTA (195) FKA (196) FLA (197) FMA (198) FPA (199) FRA (200) FSA (201) FTA (202) FKA (203) FLA (204) FMA (205) FPA (206) FRA (207) FSA (208) FTA (209) FKA (210) FLA (211) FMA (212) FPA (213) FRA (214) FSA (215) FTA (216) FKA (217) FLA (218) FMA (219) FPA (220) FRA (221) FSA (222) FTA (223) FKA (224) FLA (225) FMA (226) FPA (227) FRA (228) FSA (229) FTA (230) FKA (231) FLA (232) FMA (233) FPA (234) FRA (235) FSA (236) FTA (237) FKA (238) FLA (239) FMA (240) FPA (241) FRA (242) FSA (243) FTA (244) FKA (245) FLA (246) FMA (247) FPA (248) FRA (249) FSA (250) FTA (251) FKA (252) FLA (253) FMA (254) FPA (255) FRA (256) FSA (257) FTA (258) FKA (259) FLA (260) FMA (261) FPA (262) FRA (263) FSA (264) FTA (265) FKA (266) FLA (267) FMA (268) FPA (269) FRA (270) FSA (271) FTA (272) FKA (273) FLA (274) FMA (275) FPA (276) FRA (277) FSA (278) FTA (279) FKA (280) FLA (281) FMA (282) FPA (283) FRA (284) FSA (285) FTA (286) FKA (287) FLA (288) FMA (289) FPA (290) FRA (291) FSA (292) FTA (293) FKA (294) FLA (295) FMA (296) FPA (297) FRA (298) FSA (299) FTA (300) FKA (301) FLA (302) FMA (303) FPA (304) FRA (305) FSA (306) FTA (307) FKA (308) FLA (309) FMA (310) FPA (311) FRA (312) FSA (313) FTA (314) FKA (315) FLA (316) FMA (317) FPA (318) FRA (319) FSA (320) FTA (321) FKA (322) FLA (323) FMA (324) FPA (325) FRA (326) FSA (327) FTA (328) FKA (329) FLA (330) FMA (331) FPA (332) FRA (333) FSA (334) FTA (335) FKA (336) FLA (337) FMA (338) FPA (339) FRA (340) FSA (341) FTA (342) FKA (343) FLA (344) FMA (345) FPA (346) FRA (347) FSA (348) FTA (349) FKA (350) FLA (351) FMA (352) FPA (353) FRA (354) FSA (355) FTA (356) FKA (357) FLA (358) FMA (359) FPA (360) FRA (361) FSA (362) FTA (363) FKA (364) FLA (365) FMA (366) FPA (367) FRA (368) FSA (369) FTA (370) FKA (371) FLA (372) FMA (373) FPA (374) FRA (375) FSA (376) FTA (377) FKA (378) FLA (379) FMA (380) FPA (381) FRA (382) FSA (383) FTA (384) FKA (385) FLA (386) FMA (387) FPA (388) FRA (389) FSA (390) FTA (391) FKA (392) FLA (393) FMA (394) FPA (395) FRA (396) FSA (397) FTA (398) FKA (399) FLA (400) FMA (401) FPA (402) FRA (403) FSA (404) FTA (405) FKA (406) FLA (407) FMA (408) FPA (409) FRA (410) FSA (411) FTA (412) FKA (413) FLA (414) FMA (415) FPA (416) FRA (417) FSA (418) FTA (419) FKA (420) FLA (421) FMA (422) FPA (423) FRA (424) FSA (425) FTA (426) FKA (427) FLA (428) FMA (429) FPA (430) FRA (431) FSA (432) FTA (433) FKA (434) FLA (435) FMA (436) FPA (437) FRA (438) FSA (439) FTA (440) FKA (441) FLA (442) FMA (443) FPA (444) FRA (445) FSA (446) FTA (447) FKA (448) FLA (449) FMA (450) FPA (451) FRA (452) FSA (453) FTA (454) FKA (455) FLA (456) FMA (457) FPA (458) FRA (459) FSA (460) FTA (461) FKA (462) FLA (463) FMA (464) FPA (465) FRA (466) FSA (467) FTA (468) FKA (469) FLA (470) FMA (471) FPA (472) FRA (473) FSA (474) FTA (475) FKA (476) FLA (477) FMA (478) FPA (479) FRA (480) FSA (481) FTA (482) FKA (483) FLA (484) FMA (485) FPA (486) FRA (487) FSA (488) FTA (489) FKA (490) FLA (491) FMA (492) FPA (493) FRA (494) FSA (495) FTA (496) FKA (497) FLA (498) FMA (499) FPA (500) FRA (501) FSA (502) FTA (503) FKA (504) FLA (505) FMA (506) FPA (507) FRA (508) FSA (509) FTA (510) FKA (511) FLA (512) FMA (513) FPA (514) FRA (515) FSA (516) FTA (517) FKA (518) FLA (519) FMA (520) FPA (521) FRA (522) FSA (523) FTA (524) FKA (525) FLA (526) FMA (527) FPA (528) FRA (529) FSA (530) FTA (531) FKA (532) FLA (533) FMA (534) FPA (535) FRA (536) FSA (537) FTA (538) FKA (539) FLA (540) FMA (541) FPA (542) FRA (543) FSA (544) FTA (545) FKA (546) FLA (547) FMA (548) FPA (549) FRA (550) FSA (551) FTA (552) FKA (553) FLA (554) FMA (555) FPA (556) FRA (557) FSA (558) FTA (559) FKA (560) FLA (561) FMA (562) FPA (563) FRA (564) FSA (565) FTA (566) FKA (567) FLA (568) FMA (569) FPA (570) FRA (571) FSA (572) FTA (573) FKA (574) FLA (575) FMA (576) FPA (577) FRA (578) FSA (579) FTA (580) FKA (581) FLA (582) FMA (583) FPA (584) FRA (585) FSA (586) FTA (587) FKA (588) FLA (589) FMA (590) FPA (591) FRA (592) FSA (593) FTA (594) FKA (595) FLA (596) FMA (597) FPA (598) FRA (599) FSA (600) FTA (601) FKA (602) FLA (603) FMA (604) FPA (605) FRA (606) FSA (607) FTA (608) FKA (609) FLA (610) FMA (611) FPA (612) FRA (613) FSA (614) FTA (615) FKA (616) FLA (617) FMA (618) FPA (619) FRA (620) FSA (621) FTA (622) FKA (623) FLA (624) FMA (625) FPA (626) FRA (627) FSA (628) FTA (629) FKA (630) FLA (631) FMA (632) FPA (633) FRA (634) FSA (635) FTA (636) FKA (637) FLA (638) FMA (639) FPA (640) FRA (641) FSA (642) FTA (643) FKA (644) FLA (645) FMA (646) FPA (647) FRA (648) FSA (649) FTA (650) FKA (651) FLA (652) FMA (653) FPA (654) FRA (655) FSA (656) FTA (657) FKA (658) FLA (659) FMA (660) FPA (661) FRA (662) FSA (663) FTA (664) FKA (665) FLA (666) FMA (667) FPA (668) FRA (669) FSA (670) FTA (671) FKA (672) FLA (673) FMA (674) FPA (675) FRA (676) FSA (677) FTA (678) FKA (679) FLA (680) FMA (681) FPA (682) FRA (683) FSA (684) FTA (685) FKA (686) FLA (687) FMA (688) FPA (689) FRA (690) FSA (691) FTA (692) FKA (693) FLA (694) FMA (695) FPA (696) FRA (697) FSA (698) FTA (699) FKA (700) FLA (701) FMA (702) FPA (703) FRA (704) FSA (705) FTA (706) FKA (707) FLA (708) FMA (709) FPA (710) FRA (711) FSA (712) FTA (713) FKA (714) FLA (715) FMA (716) FPA (717) FRA (718) FSA (719) FTA (720) FKA (721) FLA (722) FMA (723) FPA (724) FRA (725) FSA (726) FTA (727) FKA (728) FLA (729) FMA (730) FPA (731) FRA (732) FSA (733) FTA (734) FKA (735) FLA (736) FMA (737) FPA (738) FRA (739) FSA (740) FTA (741) FKA (742) FLA (743) FMA (744) FPA (745) FRA (746) FSA (747) FTA (748) FKA (749) FLA (750) FMA (751) FPA (752) FRA (753) FSA (754) FTA (755) FKA (756) FLA (757) FMA (758) FPA (759) FRA (760) FSA (761) FTA (762) FKA (763) FLA (764) FMA (765) FPA (766) FRA (767) FSA (768) FTA (769) FKA (770) FLA (771) FMA (772) FPA (773) FRA (774) FSA (775) FTA (776) FKA (777) FLA (778) FMA (779) FPA (780) FRA (781) FSA (782) FTA (783) FKA (784) FLA (785) FMA (786) FPA (787) FRA (788) FSA (789) FTA (790) FKA (791) FLA (792) FMA (793) FPA (794) FRA (795) FSA (796) FTA (797) FKA (798) FLA (799) FMA (800) FPA (801) FRA (802) FSA (803) FTA (804) FKA (805) FLA (806) FMA (807) FPA (808) FRA (809) FSA (810) FTA (811) FKA (812) FLA (813) FMA (814) FPA (815) FRA (816) FSA (817) FTA (818) FKA (819) FLA (820) FMA (821) FPA (822) FRA (823) FSA (824) FTA (825) FKA (826) FLA (827) FMA (828) FPA (829) FRA (830) FSA (831) FTA (832) FKA (833) FLA (834) FMA (835) FPA (836) FRA (837) FSA (838) FTA (839) FKA (840) FLA (841) FMA (842) FPA (843) FRA (844) FSA (845) FTA (846) FKA (847) FLA (848) FMA (849) FPA (850) FRA (851) FSA (852) FTA (853) FKA (854) FLA (855) FMA (856) FPA (857) FRA (858) FSA (859) FTA (859) FKA (860) FLA (861) FMA (862) FPA (863) FRA (864) FSA (865) FTA (866) FKA (867) FLA (868) FMA (869) FPA (870) FRA (871) FSA (872) FTA (873) FKA (874) FLA (875) FMA (876) FPA (877) FRA (878) FSA (879) FTA (879) FKA (880) FLA (881) FMA (882) FPA (883) FRA (884) FSA (885) FTA (885) FKA (886) FLA (887) FMA (888) FPA (889) FRA (890) FSA (891) FTA (891) FKA (892) FLA (893) FMA (894) FPA (895) FRA (896) FSA (897) FTA (897) FKA (898) FLA (899) FMA (900) FPA (901) FRA (902) FSA (903) FTA (903) FKA (904) FLA (905) FMA (906) FPA (907) FRA (908) FSA (909) FTA (909) FKA (910) FLA (911) FMA (912) FPA (913) FRA (914) FSA (915) FTA (915) FKA (916) FLA (917) FMA (918) FPA (919) FRA (920) FSA (921) FTA (921) FKA (922) FLA (923) FMA (924) FPA (925) FRA (926) FSA (927) FTA (927) FKA (928) FLA (929) FMA (930) FPA (931) FRA (932) FSA (933) FTA (933) FKA (934) FLA (935) FMA (936) FPA (937) FRA (938) FSA (939) FTA (939) FKA (940) FLA (941) FMA (942) FPA (943) FRA (944) FSA (945) FTA (945) FKA (946) FLA (947) FMA (948) FPA (949) FRA (950) FSA (951) FTA (951) FKA (952) FLA (953) FMA (954) FPA (955) FRA (956) FSA (957) FTA (957) FKA (958) FLA (959) FMA (960) FPA (961) FRA (962) FSA (963) FTA (963) FKA (964) FLA (965) FMA (966) FPA (967) FRA (968) FSA (969) FTA (969) FKA (970) FLA (971) FMA (972) FPA (973) FRA (974) FSA (975) FTA (975) FKA (976) FLA (977) FMA (978) FPA (979) FRA (980) FSA (981) FTA (981) FKA (982) FLA (983) FMA (984) FPA (985) FRA (986) FSA (987) FTA (987) FKA (988) FLA (989) FMA (990) FPA (991) FRA (992) FSA (993) FTA (993) FKA (994) FLA (995) FMA (996) FPA (997) FRA (998) FSA (999) FTA (999) FKA (1000) FLA (1001) FMA (1002) FPA (1003) FRA (1004) FSA (1005) FTA (1005) FKA (1006) FLA (1007) FMA (1008) FPA (1009) FRA (1010) FSA (1011) FTA (1011) FKA (1012) FLA (1013) FMA (1014) FPA (1015) FRA (1016) FSA (1017) FTA (1017) FKA (1018) FLA (1019) FMA (1020) FPA (1021) FRA (1022) FSA (1023) FTA (1023) FKA (1024) FLA (1025) FMA (1026) FPA (1027) FRA (1028) FSA (1029) FTA (1029) FKA (1030) FLA (1031) FMA (1032) FPA (1033) FRA (1034) FSA (1035) FTA (1035) FKA (1036) FLA (1037) FMA (1038) FPA (1039) FRA (1040) FSA (1041) FTA (1041) FKA (1042) FLA (1043) FMA (1044) FPA (1045) FRA (1046) FSA (1047) FTA (1047) FKA (1048) FLA (1049) FMA (1050) FPA (1051) FRA (1052) FSA (1053) FTA (1053) FKA (1054) FLA (1055) FMA (1056) FPA (1057) FRA (1058) FSA (1059) FTA (1059) FKA (1060) FLA (1061) FMA (1062) FPA (1063) FRA (1064) FSA (1065) FTA (1065) FKA (1066) FLA (1067) FMA (1068) FPA (1069) FRA (1070) FSA (1071) FTA (1071) FKA (1072) FLA (1073) FMA (1074) FPA (1075) FRA (1076) FSA (1077) FTA (1077) FKA (1078) FLA (1079) FMA (1080) FPA (1081) FRA (1082) FSA (1083) FTA (1083) FKA (1084) FLA (1085) FMA (1086) FPA (1087) FRA (1088) FSA (1089) FTA (1089) FKA (1090) FLA (1091) FMA (1092) FPA (1093) FRA (1094) FSA (1095) FTA (1095) FKA (1096) FLA (1097) FMA (1098) FPA (1099) FRA (1100) FSA (1101) FTA (1101) FKA (1102) FLA (1103) FMA (1104) FPA (1105) FRA (1106) FSA (1107) FTA (1107) FKA (1108) FLA (1109) FMA (1110) FPA (1111) FRA (1112) FSA (1113) FTA (1113) FKA (1114) FLA (1115) FMA (1116) FPA (1117) FRA (1118) FSA (1119) FTA (1119) FKA (1120) FLA (1121) FMA (1122) FPA (1123) FRA (1124) FSA (1125) FTA (1125) FKA (1126) FLA (1127) FMA (1128) FPA (1129) FRA (1130) FSA (1131) FTA (1131) FKA (1132) FLA (1133) FMA (1134) FPA (1135) FRA (1136) FSA (1137) FTA (1137) FKA (1138) FLA (1139) FMA (1140) FPA (1141) FRA (1142) FSA (1143) FTA (1143) FKA (1144) FLA (1145) FMA (1146) FPA (1147) FRA (1148) FSA (1149) FTA (1149) FKA (1150) FLA (1151) FMA (1152) FPA (1153) FRA (1154) FSA (1155) FTA (1155) FKA (1156) FLA (1157) FMA (1158) FPA (1159) FRA (1160) FSA (1161) FTA (1161) FKA (1162) FLA (1163) FMA (1164) FPA (1165) FRA (1166) FSA (1167) FTA (1167) FKA (1168) FLA (1169) FMA (1170) FPA (1171) FRA (1172) FSA (1173) FTA (1173) FKA (1174) FLA (1175) FMA (1176) FPA (1177) FRA (1178) FSA (1179) FTA (1179) FKA (1180) FLA (1181) FMA (1182) FPA (1183) FRA (1184) FSA (1185) FTA (1185) FKA (1186) FLA (1187) FMA (1188) FPA (1189) FRA (1190) FSA (1191) FTA (1191) FKA (1192) FLA (1193) FMA (1194) FPA (1195) FRA (1196) FSA (1197) FTA (1197) FKA (1198) FLA (1199) FMA (1200) FPA (1201) FRA (1202) FSA (1203) FTA (1203) FKA (1204) FLA (1205) FMA (1206) FPA (1207) FRA (1208) FSA (1209) FTA (1209) FKA (1210) FLA (1211) FMA (1212) FPA (1213) FRA (1214) FSA (1215) FTA (1215) FKA (1216) FLA (1217) FMA (1218) FPA (1219) FRA (1220) FSA (1221) FTA (1221) FKA (1222) FLA (1223) FMA (1224) FPA (1225) FRA (1226) FSA (1227) FTA (1227) FKA (1228) FLA (1229) FMA (1230) FPA (1231) FRA (1232) FSA (1233) FTA (1233) FKA (1234) FLA (1235) FMA (1236) FPA (1237) FRA (1238) FSA (1239) FTA (1239) FKA (1240) FLA (1241) FMA (1242) FPA (1243) FRA (1244) FSA (1245) FTA (1245) FKA (1246) FLA (1247) FMA (1248) FPA (1249) FRA (1250) FSA (1251) FTA (1251) FKA (1252) FLA (1253) FMA (1254) FPA (1255) FRA (1256) FSA (1257) FTA (1257) FKA (1258) FLA (1259) FMA (1260) FPA (1261) FRA (1262) FSA (1263) FTA (1263) FKA (1264) FLA (1265) FMA (1266) FPA (1267) FRA (1268) FSA (1269) FTA (1269) FKA (1270) FLA (1271) FMA (1272) FPA (1273) FRA (1274) FSA (1275) FTA (1275) FKA (1276) FLA (1277) FMA (1278) FPA (1279) FRA (1280) FSA (1281) FTA (1281) FKA (1282) FLA (1283) FMA (1284) FPA (1285) FRA (1286) FSA (1287) FTA (1287) FKA (1288) FLA (1289) FMA (1290) FPA (1291) FRA (1292) FSA (1293) FTA (1293) FKA (1294) FLA (1295) FMA (1296) FPA (1297) FRA (1298) FSA (1299) FTA (1299) FKA (1300) FLA (1301) FMA (1302) FPA (1303) FRA (1304) FSA (1305) FTA (1305) FKA (1306) FLA (1307) FMA (1308) FPA (1309) FRA (1310) FSA (1311) FTA (1311) FKA (1312) FLA (1313) FMA (1314) FPA (1315) FRA (1316) FSA (1317) FTA (1317) FKA (1318) FLA (1319) FMA (1320) FPA (1321) FRA (1322) FSA (1323) FTA (1323) FKA (1324) FLA (1325) FMA (1326) FPA (1327) FRA (1328) FSA (1329) FTA (1329) FKA (1330) FLA (1331) FMA (1332) FPA (1333) FRA (1334) FSA (1335) FTA (1335) FKA (1336) FLA (1337) FMA (1338) FPA (1339) FRA (1340) FSA (1341) FTA (1341) FKA (1342) FLA (1343) FMA (1344) FPA (1345) FRA (1346) FSA (1347) FTA (1347) FKA (1348) FLA (1349) FMA (1350) FPA (1351) FRA (1352) FSA (1353) FTA (1353) FKA (1354) FLA (1355) FMA (1356) FPA (1357) FRA (1358) FSA (1359) FTA (1359) FKA (1360) FLA (1361) FMA (1362) FPA (1363) F						

SECRET
(When Filled In)

SS. 27 15V 67

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)	
3. NATURE OF PERSONNEL ACTION			
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
NO. DA. YR.		REGULAR	
11-21-67			
6. FUNDS		7. Financial Analysis No. Chargeable	
V TO V		8137 1375 0000	
CF TO V		50 USC 403 J	
X			
CF TO CF			
8. ORGANIZATIONAL DESIGNATIONS		9. LOCATION OF OFFICIAL STATION	
DOP/FE DEVELOPMENT COMPLEMENT		WASH., D.C.	
10. POSITION TITLE		11. POSITION NUMBER	
OPS. OFFICER		9997	
12. CLASSIFICATION SCHEDULE (GS, LR, etc.)		13. SERVICE DESIGNATION	
GS		D	
14. OCCUPATIONAL SERIES		15. GRADE AND STEP	
0136.01		GS 5 12 5	
16. REMARKS OTHER		17. SALARY OR RATE	
		12074 12443	
MARITAL STATUS—MARRIED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
18. ACTION CODE	19. EMPLOY CODE	20. OFFICE CODES	21. STATION CODE
SS	13	45997 FE	75013
22. NTE EXPIRES	23. SPECIAL REFERENCE	24. RETIREMENT DATA	25. SEPARATION DATA CODE
NO. DA. YR.	1. CSC 2. CIA 3. EPA 4. CODE	1. CSC 2. CIA 3. EPA 4. CODE	1. CSC 2. CIA 3. EPA 4. CODE
26. VET. PREFERENCE	27. SERV. COMP. DATE	28. LONG COMP. DATE	29. CAREER CATEGORY
CODE	NO. DA. YR.	NO. DA. YR.	CODE
0 - NONE 1 - 5 YR. 2 - 10 YR.			
30. PREVIOUS CIVILIAN GOVERNMENT SERVICE	31. LEAVE CAT.	32. FEDERAL TAX DATA	33. STATE TAX DATA
CODE	CODE	FORM EXECUTED CODE	FORM EXECUTED CODE
0 - NO PREVIOUS SERVICE 1 - NO PREVIOUS SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YRS. 3 - BREAK IN SERVICE MORE THAN 3 YRS.	1 - YES 2 - NO	NO IRS AUTHORITY	NO IRS AUTHORITY
SIGNATURE OR OTHER AUTHENTICATION			
POSTED			
11-23-67			

FORM 1150
1-6

Use Previous
Edition

SECRET

PLW

DO NOT
FURNISH TO
OTHERS
EXCEPT BY
OFFICIALS

(When Filled In)

SECRET
(When Filled In)

L J L

608

MAR 17 1967

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION

REASSIGNMENT AND TRANSFER TO
CONFIDENTIAL FUNDS

4. EFFECTIVE DATE

NO DA YR
11 11 67

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO CF

CF TO V

CF TO CF

7. Financial Analysis No. Chargeable

8. CSC OR OTHER LEGAL AUTHORITY

8137-1292 0000

50 USC 402 J

9. ORGANIZATIONAL DESIGNATIONS

10. LOCATION OF OFFICIAL STATION

DDP/FE

FE DEVELOPMENT COMPLEMENT

WASHINGTON, D.C.

11. POSITION TITLE

CPS OFFICER

12. POSITION NUMBER

107

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LB, WFL)

GS

15. OCCUPATIONAL SERIES

138-01

16. GRADE AND STEP

12-5

17. SALARY OR RATE

12945

18. REMARKS

TRAINING

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES GENERAL ADMINISTRATIVE	22. STATION CODE	23. INTEGRITY CODE	24. PAYMENT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LET.
28	13	45507	75012					
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION	33. SECURITY REQ NO	34. SEC.	EOD DATA	
35. NET PREFERENCE	36. SERV COMP DATA	37. LONG COMP DATE	38. CARRIER CATEGORY	39. FEUI / HEALTH INSURANCE	40. SOCIAL SECURITY NO			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE (AI)	43. FEDERAL TAX DATA	44. STATE TAX DATA					

SIGNATURE OR OTHER AUTHENTICATION

FORM 1150

Use Previous Edition

SECRET

FVD

FORM 1150
1-67
When Filled In

When Filled In

SECRET
(When Filled In)

BJT: 25 MAY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		MO. DA. YR. 05 21 67	REGULAR
6. FUNDS	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
X	7237 1385 0000	50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/FE		WASH., D.C.	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		3877	D
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 5	12443
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
37	10	45140 FE	75013
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LET	26. DATE OF BIRTH
MO. DA. YR.	MO. DA. YR.	MO. DA. YR.	MO. DA. YR.
27. INT. EXPIRES	28. SPECIAL REFERENCE	29. RETIREMENT DATA	30. SEPARATION DATA CODE
MO. DA. YR.	1. CSC 2. CIP 3. FIC 4. NONE	1. CSC 2. CIP 3. FIC 4. NONE	1. CSC 2. CIP 3. FIC 4. NONE
31. VET. PREFERENCE	32. SERV. COMP. DATE	33. LONG COMP. DATE	34. CAREER CATEGORY
CODE	MO. DA. YR.	MO. DA. YR.	CODE
35. PREVIOUS CIVILIAN GOVERNMENT SERVICE	36. LEAVE (A)	37. FEDERAL TAX DATA	38. STATE TAX DATA
CODE	CODE	CODE	CODE
SIGNATURE OR OTHER AUTHENTICATION			

POSTED

FORM 1150

Use Previous Edition

SECRET

BJT

APPROVED
DATE AND SIGNATURE
BY OFFICIAL

(When Filled In)

MRT: 17 NOV 66

SECRET
(When Filled In)

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER

2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION

REASSIGNMENT AND TRANSFER
TO VOUCHERED FUNDS

4. EFFECTIVE DATE

11 20 66

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO CP

7. GDS CENTER NO. CHARGEABLE

7237 1385 0000

8. CK OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATION

DDP/FE

10. LOCATION OF OFFICIAL STATION

WASH., D.C.

11. POSITION TITLE

OPS OFFICER

12. POSITION NUMBER

4025

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS-18, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

12 5

17. SALARY OR RATE

12443

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING 1. NO. 2. FILE 3. WORK	22. STATION CODE	23. INTEREST CODE	24. EMPLOY CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LST MO DA YR
16	10	45140 FE	75013					
28. DATE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CLASSIFICATION/RECLASSIFICATION DATA MO DA YR	33. SECURITY MO DA YR	34. SEE		
35. VET. PREFERENCE CODE 0 - NONE 1 - 10% 2 - 15%	36. LEAVE COMP. DATE MO DA YR	37. LEAVE COMP. DATE MO DA YR	38. CAREER CATEGORY CODE 1 - 100 2 - 100	39. LEGAL/HEALTH INSURANCE CODE 0 - NONE 1 - YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO PREVIOUS SERVICE 2 - BROAD IN SERVICE (LAST 100% 3 - BROAD IN SERVICE (LAST 100% 4 - BROAD IN SERVICE (LAST 100% 5 - BROAD IN SERVICE (LAST 100%)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM SELECTED 1 - YES 2 - NO	44. STATE TAX DATA FORM SELECTED 1 - YES 2 - NO			

SIGNATURE OR OTHER AUTHENTICATION

FORM 1120

17th November 1966

SECRET

 1. SIGNATURE OF OFFICIAL
 2. DATE
 3. POSITION
 4. OFFICE

(When Filled In)

RZF: 26 SEPT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)	
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		4. EFFECTIVE DATE MO: DA: YR: 09 25 66	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	7. COST CENTER NO. CHARGEABLE 7137 1487 0000	8. CMC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS DGP/FE		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP 12	17. SALARY OR RATE
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE (CODE)	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE
23. INTESSEE CODE	24. TRANSFER CODE	25. DATE OF BIRTH MO: DA: YR:	26. DATE OF GRADE MO: DA: YR:
27. DATE OF LEI MO: DA: YR:	28. WFE EXPIRES MO: DA: YR:	29. SPECIAL REFERENCE 1. CMC 2. PACE 3. NONE	30. RETIREMENT DATA CODE 2
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO: DA: YR:	33. SECURITY REQ. NO.	34. SEN
35. NET PREFERENCE CODE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100	36. SERV. COMP. DATE MO: DA: YR:	37. LONG. COMP. DATE MO: DA: YR:	38. CURRENT CATEGORY CODE
39. FEELT / HEALTH INSURANCE CODE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100	40. SOCIAL SECURITY NO.	41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 1 YEAR 4. BREAK IN SERVICE MORE THAN 1 YEAR	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA NO. TAX EXEMPTIONS FORM EXECUTED 1. YES 2. NO	44. STATE TAX DATA CODE 1. YES 2. NO	45. FEDERAL TAX DATA NO. TAX EXEMPTIONS FORM EXECUTED 1. YES 2. NO	46. STATE TAX DATA CODE 1. YES 2. NO
SIGNATURE OR OTHER AUTHENTICATION			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 9-27-66/hm </div>			

FORM 1150

Use Previous
Edition

SECRET

1. If the
 employee is not
 employed by
 the Government

(When Filled In)

123

1. Social Sec. No.		2. Name		3. Civil Control Number		4. LWOP Status	
				45 500 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Time in Grade	Grade	Step	Salary	Effective Date
GS 12	4	12064	09/13/64	GS 12	5	12093	09/11/66
7. TYPE ACTION				8. PAY ADJ.			
9. Remarks and Authorization							
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE: 8/24/66 PAY CHANGE NOTIFICATION							

1-65-507E-116-343

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
 AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN	FUNDS	CH-1161	OLD SALARY	NEW SALARY
					GS 12 4	121,223 312,000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 5 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	OPGN.	FUND	GR-STEP	OLD SALARY	NEW SALARY
		45	500	CF GS 12 4	\$11,315	\$11,723

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE
SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM
ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR
OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL
INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY
DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL
INTELLIGENCE DATED 8 OCTOBER 1962.

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE
AND STEP AS INDICATED IN CHART BELOW.

GENERAL SCHEDULE RATES

Federal Employees Salary Act of 1964

GRADE	Per Annum Rates and Steps									
	1	2	3	4	5	6	7	8	9	10
GS-1	\$3,385	\$3,500	\$3,615	\$3,730	\$3,845	\$3,960	\$4,075	\$4,190	\$4,305	\$4,420
GS-2	3,680	3,805	3,930	4,055	4,180	4,305	4,430	4,555	4,680	4,805
GS-3	4,005	4,140	4,275	4,410	4,545	4,680	4,815	4,950	5,085	5,220
GS-4	4,480	4,620	4,760	4,900	5,080	5,230	5,380	5,530	5,680	5,830
GS-5	5,000	5,165	5,330	5,495	5,660	5,825	5,990	6,155	6,320	6,485
GS-6	5,505	5,690	5,875	6,060	6,245	6,430	6,615	6,800	6,985	7,170
GS-7	6,050	6,250	6,450	6,650	6,850	7,050	7,250	7,450	7,650	7,850
GS-8	6,630	6,830	7,030	7,230	7,430	7,630	7,830	8,030	8,230	8,430
GS-9	7,220	7,420	7,620	7,820	8,020	8,220	8,420	8,620	8,820	9,020
GS-10	7,900	8,100	8,300	8,500	8,700	8,900	9,100	9,300	9,500	9,700
GS-11	8,650	8,850	9,050	9,250	9,450	9,650	9,850	10,050	10,250	10,450
GS-12	10,250	10,450	10,650	10,850	11,050	11,250	11,450	11,650	11,850	12,050
GS-13	12,075	12,275	12,475	12,675	12,875	13,075	13,275	13,475	13,675	13,875
GS-14	14,170	14,370	14,570	14,770	14,970	15,170	15,370	15,570	15,770	15,970
GS-15	16,460	16,660	16,860	17,060	17,260	17,460	17,660	17,860	18,060	18,260
GS-16	18,915	19,115	19,315	19,515	19,715	19,915	20,115	20,315	20,515	20,715
GS-17	21,445	21,645	21,845	22,045	22,245	22,445	22,645	22,845	23,045	23,245
GS-18	24,300	24,500	24,700	24,900	25,100	25,300	25,500	25,700	25,900	26,100

DLR: 30 SEPT 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
[REDACTED]			
3. CATEGORY OF PERSONNEL ACTION (CANCELLATION)		4. EFFECTIVE DATE MO DA YR 09 1 18 64	
5. CATEGORY OF EMPLOYMENT REGULAR		6. COST CENTER NO. CHARGEABLE	
7. FUNDS U TO U U TO U U TO U U TO U X U TO U		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP FE CS/CS DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 9997	
13. CLASSIFICATION SCHEDULE (GS, LE, etc.) GS		14. GRADE AND STEP 05 2 12 4	
15. OCCUPATIONAL SERIES 0136.01		16. SALARY OR RATE 10290 11315	
17. REMARKS ADMIN ERROR			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

18. ACTION: 22. EMPLOY CODE		21. OFFICE CODES		23. STATUS CODE		24. INTEGRATED CODE		25. GRADE		26. DATE OF BIRTH		27. DATE OF GRADE		28. DATE OF LEI	
01 13		45927 FE		75013		1		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
29. DATE EXPIRES		30. SPECIAL OFFERINGS		31. RETIREMENT DATA		32. PARATION DATA (CODE)		33. CORRECTION		34. SECURITY		35. SER		36. SER	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
37. VET. PREFERENCE		38. VET. (DDP) DATA		39. VET. (DDP) DATA		40. EARLIER CATEGORY		41. FEELT / HEALTH INSURANCE		42. SOCIAL SECURITY NO.		43. SOCIAL SECURITY NO.		44. SER	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
45. PREVIOUS ESTABLISHMENT SERVICE DATA		46. VET. (DDP) DATA		47. VET. (DDP) DATA		48. FEDERAL TAX DATA		49. STATE TAX DATA		50. SOCIAL SECURITY NO.		51. SOCIAL SECURITY NO.		52. SER	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	

SIGNATURE OF OFFICIAL AUTHORIZING ACTION

POSTED

10/22/64 215

11-64 1130

Use Previous Edition

SECRET

11-64
Controlled Use Only
When Filled In

(When Filled In)

DLB: 23 SEPT 64

SECRET
(When Filled In)

ODF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION

4. EFFECTIVE DATE

5. CATEGORY OF EMPLOYMENT

09 13 64

REGULAR

6. FUNDS

7. TO V

8. TO V

9. TO V

X

10. TO V

7. CDS CENTER NO. CHARGEABLE

8. CDS OR OTHER LEGAL AUTHORITY

5137 1392 1000

50 USC 403 J

9. ORGANIZATIONAL DESIGNATION

10. LOCATION OF OFFICIAL STATION

DDP FE
GS/CS DEVELOPMENT COMPLEMENT

WASH., D. C.

11. POSITION TITLE

12. POSITION NUMBER

13. SERVICE DESIGNATION

OPS OFF

9997

D

14. CLASSIFICATION SCHEDULE (GS, B, etc.)

15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

GS

0136.01

05 2
12 4

10290
11315

18. REMARKS

FINAL LISTING

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRAL CODE	24. PAPER CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LST
55	13	45097FE	75013	1				
28. BTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CANCELLATION DATE	33. SECURITY REG NO	34. SER.		
35. PER PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEEL / HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
41. PREVIOUS EMPLOYMENT SERVICE DATA	42. LEAVE (Y/N)	43. FEDERAL TAX DATA	44. STATE TAX DATA					

SIGNATURE ON OTHER AUTHORIZATION

1012ED

Handwritten signature

FORM 10-22 11-20

Use Previous Edition

SECRET

SECRET
(When Filled In)

JGD: 11 SEPT 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS				4. EFFECTIVE DATE MO DA YR 09 13 64		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
V TO V U TO V		X U TO U		5137 1392 mm		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DDP/FE CS/CS DEVELOPMENT COMPLEMENT				10. LOCATION OF OFFICIAL STATION WASH., D. C.					
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 9997		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 4		17. SALARY OR RATE 11315			
18. REMARKS TRAINING. SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION (CODE)	20. TOY (CODE)	21. STATION (CODE)	22. INTEGRATE (CODE)	23. DATE OF BIRTH (MO DA YR)	24. DATE OF ENTRY (MO DA YR)	25. DATE OF LEI (MO DA YR)			
20	13	45997	FE	75013					
26. DATE EXPIRES (MO DA YR)	27. SPECIAL REFERENCE	28. RETIREMENT DATA (CODE)	29. SEPARATION DATA (CODE)	30. CORRECTION/CANCELLATION DATA (TYPE MO DA YR)	31. SECURITY RTO NO			32. SEC NO	
					EOD DATA				
33. PFT. PREFERENCE (CODE)	34. SP89 COMP. DATE (MO DA YR)	35. LONG COMP. DATE (MO DA YR)	36. CAREN CATEGORY (CODE)	37. FSLT. HEALTH INSURANCE (CODE)	38. SOCIAL SECURITY NO.				
39. PREVIOUS GOVERNMENT SERVICE DATA (CODE)		40. LEAVE CAT (CODE)		41. FOREIGN TRL DATA (CODE)		42. STATE TRL DATA (CODE)			
A. NO. OF GOVERNMENT SERVICE 1. NO. OF GOVERNMENT SERVICE 2. NO. OF GOVERNMENT SERVICE 3. NO. OF GOVERNMENT SERVICE		A. NO. OF GOVERNMENT SERVICE 1. NO. OF GOVERNMENT SERVICE 2. NO. OF GOVERNMENT SERVICE 3. NO. OF GOVERNMENT SERVICE		A. NO. OF GOVERNMENT SERVICE 1. NO. OF GOVERNMENT SERVICE 2. NO. OF GOVERNMENT SERVICE 3. NO. OF GOVERNMENT SERVICE		A. NO. OF GOVERNMENT SERVICE 1. NO. OF GOVERNMENT SERVICE 2. NO. OF GOVERNMENT SERVICE 3. NO. OF GOVERNMENT SERVICE			
SIGNATURE OR OTHER AUTHENTICATION									
FROM: FE									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10 TLD 13 SEP 64 SECRET </div>									

1000 1150

Use Previous
Edition

13 SEP 64 SECRET

10 TLD
 13 SEP 64
 SECRET

(When Filled In)

1. Serial No.		2. Name		3. Civil Service Number		4. LWOP Hours	
				27 RF 45 160 V			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS 12 3		10,960	09/19/63	GS 12 4		11,315	09/13/64
7. TYPE ACTION							
PSI LSI ADI							
8. Remarks and Authorization							
/ NO EXCESS LWOP / IN PAY STATUS AT END OF WAITING PERIOD / LWOP STATUS AT END OF WAITING PERIOD / CLERKS INITIALS <i>WJ</i> AUDITED BY							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE <i>[Signature]</i>				DATE <i>10/15/64</i>			
PAY CHANGE NOTIFICATION <i>[Signature]</i>							

Form 560

Obsolete Previous Edition

(4-61)

PAYMENT GRAPH

SEP 14 10 34 AM '64

DEC 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

2. NAME (LAST-FIRST MIDDLE)

REASSIGNMENT

4. EFFECTIVE DATE

12 1 02 1964

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO V

V TO V

X

V TO V

7. COST CENTER NO. CHARGEABLE

5137 1487 0000

8. CSC OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS

DDP FE

10. LOCATION OF OFFICIAL STATION

OPS OFFICER

4608

D

14. CLASSIFICATION SCHEDULE (GS, AB, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

12 4

17. SALARY GS RATE

11315

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE	23. INTEREST CODE	24. RACIAL CODE	25. DATE OF BIRTH	26. DATE OF SERVICE	27. DATE OF LAST
37	10	45300	FE	77205	3			
28. APT. EXPIRES	29. SPECIAL REFERENCE	30. RESIGNMENT DATE	31. SEPARATION DATA CODE	32. CODE	EOD DATA			
33. VET. PREFERENCE	34. VET. EMP. DATE	35. VET. EMP. DATE	36. VET. EMP. DATE	37. VET. EMP. DATE	38. VET. EMP. DATE	39. VET. EMP. DATE	40. VET. EMP. DATE	41. VET. EMP. DATE
42. PREVIOUS EMPLOYMENT SERVICE DATA	43. PREVIOUS EMPLOYMENT SERVICE DATA	44. PREVIOUS EMPLOYMENT SERVICE DATA	45. PREVIOUS EMPLOYMENT SERVICE DATA	46. PREVIOUS EMPLOYMENT SERVICE DATA	47. PREVIOUS EMPLOYMENT SERVICE DATA	48. PREVIOUS EMPLOYMENT SERVICE DATA	49. PREVIOUS EMPLOYMENT SERVICE DATA	50. PREVIOUS EMPLOYMENT SERVICE DATA

SIGNATURE OF OFFICE OF PERSONNEL

10-11-64

5137 1487 0000

11-11-64

11-11-64

11-11-64

11-11-64

5137 1487 0000

11-11-64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/01/64

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	
REASSIGNMENT		MO DA YR 08 31 64	
5. FUNDS		6. COST CENTER NO. (CHARGEABLE)	
R V TO V U TO V		V TO U U TO U	
		9237 1352 0000	
7. ORGANIZATIONAL DESIGNATION		8. CYC OR OTHER LEGAL AUTHORITY	
DDP/P6 DIVISION			
9. ORGANIZATIONAL DESIGNATION		10. LOCATION OF OFFICIAL STATION	
		WASH., D. C.	
11. POSITION TITLE		12. POSITION NUMBER	
OPS OFFICER		4429	
13. CAREER SERVICE DESIGNATION		14. GRADE AND STEP	
D		12	
15. CLASSIFICATION SCHEDULE (GS-10, etc.)		16. OCCUPATIONAL SERIES	
GS		0136.01	
17. SALARY OR RATE		18. REMARKS	
SIGNATURE OR OTHER AUTHENTICATION			
FOI D			
9/1/64 met			

Form 1-64 1-64

Use Previous 1-64

SECRET

SECRET
Excluded from automatic
downgrading and
declassification

(When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN FUNDS	GR-ST	OLD SALARY	NEW SALARY
		45 160 V	GS 12 3	\$10,105	\$10,640

1. Serial No. 2. Name 3. Cost Center Number 4. LWOP Hours

5. OLD SALARY RATE 6. NEW SALARY RATE 7. TYPE ACTION

Grade	Step	Salary	Eff. Date	Grade	Step	Salary	Eff. Date	PSI	LSI	ADJ.
GS 12	2	9,790	07/16/62	GS 12	3	\$10,105	09/15/63			

8. Remarks and Authorization

/ NO EXCESS LWOP
/ IN PAY STATUS AT END OF WAITING PERIOD
/ LWOP STATUS AT END OF WAITING PERIOD
CLERKS INITIALS AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS
OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE DATE

PAY CHANGE NOTIFICATION

RZR: 29 APR 63

SECRET
(When Filled In)

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST FIRST MIDDLE)

3. NATURE OF PERSONNEL ACTION
REASSIGNMENT AND CHANGE OF
SERVICE DESIGNATION4. EFFECTIVE DATE
MO. DA. YR.
04 29 63

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

X

V TO V

V TO CP

CP TO V

CP TO CP

7. COST CENTER NO. CHARGEABLE
3237 1250 1000

8. CSC OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS

DDP/EE

10. LOCATION OF OFFICIAL STATION

WASHINGTON, D.C.

OPS OFFICER

12. POSITION NUMBER
2603

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

GS

15. OCCUPATIONAL SERIES

0135.01

16. GRADE AND STEP

12 2

17. SALARY OR RATE

9790

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE SYMBOLS NUMERIC ALPHABETIC	22. STATION CODE	23. INTERVIEW CODE	24. HOURS	25. DATE OF BIRTH	26. DATE OF SERVICE	27. DATE ACQUIRED
37	10	56100 FE	75013					
28. HIC APPLICABLE	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CANCELLATION/CANCELLATION DATA	33. SECURITY			
					34. SECURITY			
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. HEALTH/HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA			42. LEAVE/LEAVE CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA		
1. NO. YEARS IN SERVICE 2. NO. YEARS IN SERVICE (LAST 5 YRS) 3. NO. YEARS IN SERVICE (LAST 10 YRS)			1. YES 2. NO	1. YES 2. NO		1. YES 2. NO		

SIGNATURE OR OTHER AUTHENTICATION

POSTED

[Signature]

FORM 1150
1-63Use Previous
Editions

[Signature]

23 APR 1963

SECRET

 1. YES
 2. NO
 3. NO

FORM 1150-20

ABM: 20 DEC 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS						4. EFFECTIVE DATE MO. DA. YR. 12 23 62		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		3257 1019 6000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DOI ORR OFFICE OF THE ASSISTANT DIRECTOR						10. LOCATION OF OFFICIAL STATION WASH., D. C.					
11. POSITION TITLE						12. POSITION NUMBER 1564		13. CAREER-SERVICE DESIGNATION 1R			
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS				15. OCCUPATIONAL SERIES 1390.08		16. GRADE AND STEP 12 2		17. SALARY OR RATE 9790			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 16	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 88100 ORR		22. STATION CODE 75013	23. INTEGRITY CODE	24. MONTH CODE 1	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.		
28. INT. EXPIRY MO. DA. YR.		29. SPECIAL REFERENCE 1 - CSC 2 - FICA 3 - ACSP		30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.		34. SEN.	
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PP 2 - 10 PP		36. SERV. COMP. DATE MO. DA. YR.		37. LONG. COMP. DATE MO. DA. YR.		38. CAREER CATEGORY CAR. STS. CODE PROV. TEMP.		39. FECLT / HEALTH INSURANCE CODE 0 - NONE 1 - YES		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YRS 3 - BREAK IN SERVICE MORE THAN 3 YRS				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM SELECTED CODE NO. TAX DEDUCTIONS 1 - YES 2 - NO		44. STATE TAX DATA CODE 1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 20 DEC 62 </div> </div>											

FORM 1150

Use Previous Edition

SECRET

FORM 1150-1
FEDERAL AND STATE
EMPLOYEE USE
ONLY

(When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.
 EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST SALARY	OLD GR-ST SALARY	NEW GR-ST SALARY	NEW GR-ST SALARY
[REDACTED]	70530		CF 12 2	\$ 9215		12 2	\$ 9700

1. Serial No.		2. Name		3. Civil Control Number		4. LWOP Hours	
[REDACTED]		[REDACTED]		70 530 CF 3			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date
GS 12 1	3	8,955	03/19/61	GS 12 2	3	9,215	09/16/62
7. TYPE ACTION							
PSI LSI ADI							
8. Remarks and Authentication							
/ NO EXCESS LWOP / EXCESS LWOP / IN PAY STATUS AT END OF WAITING PERIOD / IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS PAY C [REDACTED] NOTIFICATION							

PSC: 17 MARCH 1961

SECRET
(When Filled In)

OCF										NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER					2. NAME (LAST-FIRST-MIDDLE)																		
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE					5. CATEGORY OF EMPLOYMENT								
PROMOTION										03 19 61					REGULAR								
6. FUNDS					7. COST CENTER NO. CHARGEABLE					8. CSC OR OTHER LEGAL AUTHORITY													
<div style="display: flex; justify-content: space-between;"> V TO V V TO CF </div> <div style="display: flex; justify-content: space-between;"> CF TO V X CF TO CF </div>					1137 7000 6135					50 USC 403 J													
9. ORGANIZATIONAL DESIGNATION										10. LOCATION OF OFFICIAL STATION													
OFFICE OF DDI (TOKYO) STRATEGIC INTELLIGENCE STAFF																							
11. POSITION TITLE										12. POSITION NUMBER					13. CAREER SERVICE DESIGNATION								
										0096					1R								
14. CLASSIFICATION SCHEDULE (GS, PL, etc.)					15. OCCUPATIONAL SERIES					16. GRADE AND STEP					17. SALARY OR RATE								
GS					1390.08					12 1					8955								
18. REMARKS																							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																							
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTELLIGENCE CODE		24. MODER CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LST							
22		10		70530 DDI		37587				3		03 19 61		03 19 61		03 19 61							
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.		34. SEX											
								EOD DATA															
35. VET. PREFERENCE		36. SEAV. COMP. DATE		37. LONG. COMP. DATE		38. MIL. SERV. CREDIT/LED		39. HEALTH INSURANCE		40. SOCIAL SECURITY NO.													
41. PREVIOUS GOVERNMENT SERVICE DATA						42. LEAVE CAT.						43. FEDERAL TAX DATA						44. STATE TAX DATA					
SIGNATURE OR OTHER AUTHENTICATION																							
<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 5px;"> POSTED MARCH 28-61 </div> <div style="border: 1px solid black; width: 200px; height: 50px;"></div> </div>																							

Form 1150
6-63Obsolete Previous
Editions

SECRET

14-511

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORG.		4. FUNDS		5. ALLOTMENT	
				DDI 3		UV			
6. OLD SALARY RATE									
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			7. NEW SALARY RATE			
			MO	DA	YR	GRADE	STEP	SALARY	EFFECTIVE DATE
GS 11	2	\$ 7,820	04	19	59	GS 11	3	\$ 8,080	10 16 60
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER									
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP					9. NUMBER OF HOURS LWOP				
IF EXCESS LWOP, CHECK FOLLOWING:									
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD					10. INITIALS OF CLERK				
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD					11. AUDITOR				
TO BE COMPLETED BY THE OFFICE OF PERSONNEL									
12. TYPE OF ACTION					13. REMARKS				
<input type="checkbox"/> P.S.S. <input type="checkbox"/> L.A.I. <input type="checkbox"/> PAY ADJUSTMENT					WR				
14. AUTHENTICATION									
<div style="border: 1px solid black; width: 200px; height: 40px; margin: 0 auto;"></div>									

PAY CHANGE NOTIFICATION

FORM 5-58

560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560A AND 560B

SECRET

OFFICIAL PERSONNEL FOLDER

(4)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

GD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
IR	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 70px; height: 20px;"></div>	18 25	GS-11 2	\$ 7,270	\$ 7,820

151

DIRECTOR OF PERSONNEL

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS A CHANGE IN OCCUPATIONAL
SERIES RESULTING FROM APPLICATION OF STAFFING COMPLEMENT CHANGE

AUTHORIZATION NUMBER 22 DATED 1 JULY 1960.

SD	NAME	SERIAL	ORGN	OLD OCC SERIES	NEW OCC SERIES
IR			10 25	1390.06	1390.08

/S/

DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

JFC:7 JULY 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No.		2. Name (Last-First-Middle)		3. Date Of Birth		4. Vet. Pref.		5. Sex		6. CS-EOD	
						None-0 5 Pt. 1 10 Pt. 2		Code 1		Mo. Da. Yr. 06 15 55	
7. SCD		8. CSC Rating		9. CSC Or Other Legal Authority		10. Appt. Authority		11. FEGLI		12. LCD	
Mo. Da. Yr. 04 16 54		Yes-1 No-2 1		Code 50 USCA 403-J		Mo. Da. Yr. Mo. Da. Yr.		Yes-1 No-2 1		Mo. Da. Yr. 06 15 55	

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code		15. Location Of Official Station		Station Code	
DDI ORR				1323 WASH., D.C.		75013	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.	
Dept. - 1 USID - 3 Frqn. - 5		Code 2 IDENTIFICATION SPEC		92301		GS	
20. Occup. Series		21. Grade & Step		22. Salary Or Rate		23. SO	
1390.06		11 2		\$ 7270		1R	
24. Date Of Change		25. Pos. Due		26. Appropriation Number			
Mo. Da. Yr. 10 20 57		Mo. Da. Yr. 04 19 59		8 5709 20			

ACTION

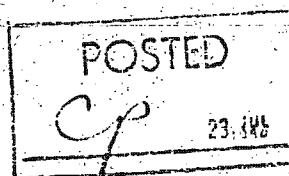
27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS		06		07 26 59		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations		Code		32. Location Of Official Station		Station Code	
OFFICE OF DDI (TOKYO) STRATEGIC INTELLIGENCE STAFF		1825				37587	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.	
Dept. - 1 USID - 3 Frqn. - 5		Code 5		000		GS	
37. Occup. Series		38. Grade & Step		39. Salary Or Rate		40. SO	
1390.06		11 2		\$ 7270		1R	
41. Date Of Change		42. Pos. Due		43. Appropriation Number			
Mo. Da. Yr. 10 20 57		Mo. Da. Yr. 10 11 59		0 3700 75 901			

44. Remarks:

SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.



SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORG.		4. FUNDS		5. ALLOTMENT	
				DDI/ORR 3		V-20			
6. OLD SALARY RATE						7. NEW SALARY RATE			
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE
			MO.	DA.	YR.				MO. DA. YR.
GS 11	1	\$ 7,030	10	20	57	GS 11	2	\$ 7,270	04 19 59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER									
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LEOP <input type="checkbox"/> EXCESS LEOP						9. NUMBER OF HOURS LEOP			
IF EXCESS LEOP, CHECK FOLLOWING:						10. INITIALS OF CLERK			
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY			
<input type="checkbox"/> IN LEOP STATUS AT END OF WAITING PERIOD									
TO BE COMPLETED BY THE OFFICE OF PERSONNEL									
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS			
GRADE	STEP	SALARY	MO.	DA.	YR.				
14. AUTHENTICATION									
<p>65. 11. 25 : 11. 25</p> <p>PAYROLL BRANCH</p> <p align="right">CP</p> <p align="right">zu</p>									

FORM NO. 5605
1 MAR 58

SECRET

PERSONNEL FOLDER (4)

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS RESLOTTING RESULTING
FROM R-20-250

SER. #	NAME	SD	OLD SLOT	NEW SLOT	DATE
--------	------	----	----------	----------	------

IR	0925.01	923	03/11/59
----	---------	-----	----------

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1959 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE, SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
		GS-11-1	\$ 6,390	\$ 7,030

/S/ DIRECTOR OF PERSONNEL

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. Serial No.		2. Name (Last-First-Middle)		3. Date Of Birth			4. Vet. Prof.		5. Sex		6. CS - EOD		
				Mo.	Da.	Yr.	None-0	Code		Mo.	Da.	Yr.	
							5: Pt. 1						
							10: Pt. 2						
7. SCB		8. CSC Reinst.		9. CSC Or Other Legal Authority			10. Apmt. A/Hlday		11. FEGLI		12. LCD		
Mo.	Da.	Yr.	Yes-1	Code				Mo.	Da.	Yr.	Yes-1	Code	
1	1		No-2	1	CSC A B C D J						No-2		

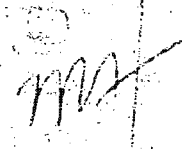
PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
COT - CDR						WASH., D.C.					
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - 8	Code										
USfld - 4		IDENTIFICATION CPE									
Frgh - 6											
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grada		25. PSI Due		26. Appropriation Number	
1	2	\$ 575		HR		Mo. Da. Yr.		Mo. Da. Yr.		100-5	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
PROMOTION		100		Mo. Da. Yr.		RECALL		1			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
COT - CDR						WASH., D.C.					
33. Dept. Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - 2	Code										
USfld - 4		IDENTIFICATION CPE									
Frgh - 6											
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grada		42. PSI Due		43. Appropriation Number	
1	1	\$ 575		HR		Mo. Da. Yr.		Mo. Da. Yr.		57-2	
44. Remarks											
<div align="right">  11/20/52 </div>											

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED OFFICER		4. FUNDS		5. ALLOTMENT			
				DDI/ORR 3		V-20					
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
9	1	\$ 5,440	07	01	56	9	2	\$ 5,575	06	30	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
DATE			SIGNATURE			DATE			SIGNATURE		
23 May 57											
PERIODIC STEP INCREASE											
SECRET											
PERSONNEL FOLDER (4)											

FORM NO. 560
1 MAR 56

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED OFFICER		4. FUNDS		5. ALLOTMENT			
				DDI/ORR		V-20					
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
9	1	\$ 5,440	07	01	56	9	2	\$ 5,575	06	30	57
8. CHECK ONE: <input type="checkbox"/> NO STEPS LOST <input type="checkbox"/> EXCESS LEAVE 9. NUMBER OF HOURS LOST <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LAST STATUS AT END OF WAITING PERIOD 10. INITIALS OF CLERK 11. AUDITED BY											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE 13. SIGNATURE											
14. AUTHORIZATION											
PERIODIC STEP INCREASE											
SECRET											
PERSONNEL FOLDER											

FORM NO. 560
1 MAR 56

STANDARD FORM 52
PREPARED BY THE
U. S. GOVERNMENT PRINTING OFFICE
WASHINGTON, D. C. 20540

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One (given name, initial(s), and surname)

2. DATE OF BIRTH

3. REQUEST NO.

4. DATE OF RECEIPT

18 April 1957

5. NATURE OF ACTION REQUESTED:

A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)

Reassignment

6. EFFECTIVE DATE
A. PROPOSED:

ASAP

7. C.S. OR OTHER
LEGAL AUTHORITY

B. POSITION (Specify whether establish, change grade or title, etc.)

B. APPROVED:

2 JUN 1957

FROM—

Identification Specialist 7-924.03
GS-1390.06-09 \$5440.00 per annum
DDI/Office of Research and Reports
Chief,

8. POSITION TITLE AND
NUMBER

9. SERVICE GRADE AND
SALARY

10. ORGANIZATIONAL
DESIGNATION

11. HEADQUARTERS

12. FIELD OR DEPARTMENTAL

TO—

Identification Specialist 7-923.01
GS-1390.06-09 \$5440.00 per annum
DDI/Office of Research and Reports

Washington, D.C.

Washington, D.C.

☐ FIELD

☒ DEPARTMENTAL

☐ FIELD

☒ DEPARTMENTAL

13. REMARKS (Use reverse if necessary)

Reassignment submitted to conform to T/O reorganization

14. REQUEST APPROVED BY

Signature:

Title: Chief, Administrative Staff, O-2

15. FROM 7-5709-20
TO 7-5709-20

16. POSITION CLASSIFICATION ACTION

NEW VICE 1 A 1 B 1 C 1 D 1 E 1 F 1 G 1 H 1 I 1 J 1 K 1 L 1 M 1 N 1 O 1 P 1 Q 1 R 1 S 1 T 1 U 1 V 1 W 1 X 1 Y 1 Z

SD/IR

17. DATE OF APPOINTMENT
18. DATE OF RESIGNATION
(1957-)

19. LEGAL RESIDENCE
☐ CLAIMED ☐ REJECTED
STATE:

20. STANDARD FORM 50 NUMBER

POSTED

01 1957

21. CLEARANCE

INITIAL OF SIGNATURE

DATE

REMARKS

A

B. C. S. CONTROL

C. CLASSIFICATION

D. PLACEMENT OF NAME

22. APPROVED BY

1957 JUN 1957

PAYROLL CHANGE SLIP— PERSONNEL COPY

CENTRAL INTELLIGENCE AGENCY P.C. 27 May 1955
SR-9297-1 CB

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS. JOSEPH STEVE NAME, INITIALS, AND SURNAME) [REDACTED]		2. DATE OF BIRTH [REDACTED]	3. JOURNAL OR ACTION NO. [REDACTED]	4. DATE 15 June 1955
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) RECEIVED APPOINTMENT		6. EFFECTIVE DATE 15 June 1955	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403.1	
FROM		TO		
8. POSITION TITLE Ident. Specialist P 925.99		9. SERVICE, SERIES, GRADE, SALARY GS-1390.06-7 \$4205.00 per annum		
10. ORGANIZATIONAL DESIGNATIONS DDI/Office of Research and Reports Office of Chief, [REDACTED]		11. HEADQUARTERS Washington, D.C.		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> OTHER <input type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>		
14. POSITION CLASSIFICATION ACTION RC		15. DATE OF APPOINTMENT AFFIDAVIT 15 June 1955		
16. SUBJECT TO C.S. RETIREMENT ACT Yes		17. LEGAL RESIDENCE New York		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. Subject to the satisfactory completion of a trial period of one year and a medical examination. R3-69 RCV 06/15/55 CSC 06/15/55 L2 06/15/55				
POSTED 27 JUN 1955				

3. PERSONNEL FOLDER COPY

STANDARD FORM NO. 64 (PART)
REV. APRIL 1964
GSA GEN. REG. NO. 27
U. S. GOVERNMENT PRINTING OFFICE
CHAPTER 1, FEDERAL PROCUREMENT, GENERAL

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (Last - First - Middle - Suffix) (Print Name, Initials, and Surname)				2. DATE OF BIRTH		3. JOURNAL OR ACTION NO.		4. DATE	
This is to modify one of the following action affecting your employment:								26 June 1956	
5. NATURE OF ACTION (See Standard Form 100-1)				6. EFFECTIVE DATE		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY			
PROMOTION				1 July 1956		50 UDCA 601.1			
FROM				TO					
8. POSITION TITLE Identification Specialist F-985.99 9. SERVICE NUMBER 02-1390.06-7 \$4660.00 per annum 10. ORGANIZATIONAL DESIGNATION 131630 11. HEADQUARTERS R 12. FIELD OR DEPT Washington, D. C.				13. POSITION CLASSIFICATION ACTION YES NO L A REAL 14. LEGAL RESIDENCE CLAIMED PROVED 15. DATE OF APPOINTMENT 16. DATE OF PROMOTION 17. DATE OF RESIGNATION					
18. VETERAN'S PREFERENCE NONE WHITE OTHER S. P. 10 POINT 19. APPROPRIATION FROM: 7-5703-20 TO: 750-13				20. REMARKS 21. SIGNATURE 22. DATE 23. 06/25/56					

CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER	2. NAME (last, first, middle)	3. DATE OF BIRTH	4. SEX	5. GRADE	6. BD
			M	GS-13	D
7. OFFICIAL POSITION TITLE	8. OFF/DIV/BR OF ASSIGNMENT	9. CURRENT STATION	10. CODE (1-4)	11. NOB	12. OF
Ops Officer	DDO/EA	Hqs			
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (spec)	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> ANNUAL
				<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
13. REPORTING PERIOD (from-to)			14. DATE REPORT DUE IN O.P.		
Feb - Jul 1974			supervisor		

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C

PERFORMANCE EVALUATION

U - Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or recommended in Section D.
M - Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial action taken or recommended should be described.
P - Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S - Strong	Performance is characterized by exceptional proficiency.
O - Outstanding	Performance is exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO.	RATING LETTER
See Section C	
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION	
Place the overall rating which best describes the employee's performance in the current position. This rating should be based on the employee's performance in all specific duties performed during the rating period. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).	RATING LETTER

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

5

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

15 July 1974

OFFICIAL TITLE OF SUPERVISOR

Chief, EA/

TYPED OR PRINTED NAME AND SIGNATURE

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

15 July 1974

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully agree with the supervisor's narrative comments. It would be grossly misleading to attempt to provide letter ratings or a performance evaluation under the unique conditions which obtained throughout this period.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

IN/EA

4. BY EMPLOYEE

EMPLOYEE'S STATE: DATE SHOWN TO EMPLOYEE IN FULL (SEE FORM OF IN 5-60000)

DATE

15 July 1974

SIGNATURE

CLASSIFICATION

7

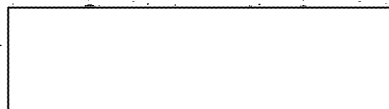
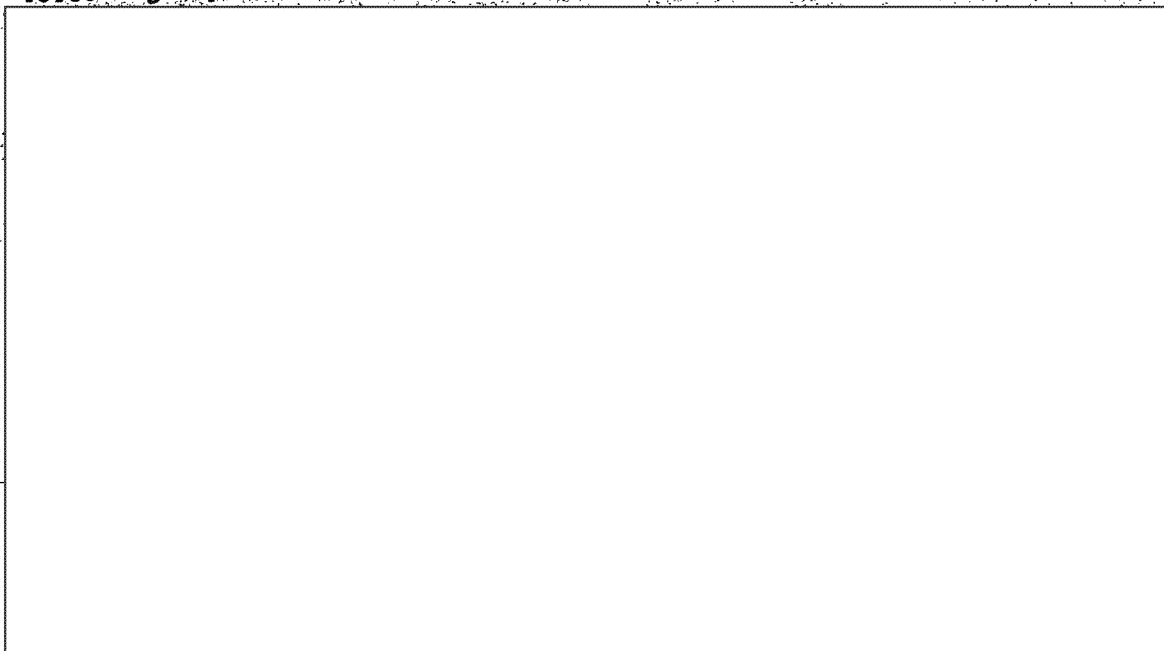
SECRET

28 August 1974

MEMORANDUM FOR THE RECORD

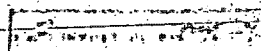
SUBJECT: Meritorious Unit Citation

On 20 August 1974 the Director of Central Intelligence approved award of the Meritorious Unit Citation [redacted] in recognition of the outstanding performance of the following employees during the period June 1971 to December 1973:



Recorder
Honor and Merit Awards Board

SECRET



CONFIDENTIAL

FITNESS REPORT				NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A. GENERAL INFORMATION							
1. EMPLOYEE NUMBER		2. NAME (last, first, middle)		3. DATE OF BIRTH		4. SEX	5. GRADE
						M	GS-13 D
7. OFFICIAL POSITION TITLE				8. OFF/DIV/BR OF ASSIGNMENT		9. CURRENT STATION	
Ops Officer				FE			
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 31-MONTH	<input type="checkbox"/> 30-MONTH	<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to)		13. DATE REPORT DUE IN O.P.		
			30 Nov 72-31 July 73		30 September 1973		
SECTION B. PERFORMANCE EVALUATION							
<p>U - Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M - Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P - Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
						P	
						RATING LETTER	
						P	
						RATING LETTER	
						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Prepare reports, correspondence and other management/administrative requirements.						P	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal traits, etc. Evaluate and partition accordingly as talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most nearly reflects his level of performance.						RATING LETTER	

FPM 45N

CONFIDENTIAL

1. 107001 2. 21 107001

CONFIDENTIAL

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
21 August 1973		
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
21 August 1973	DCOS	
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
5 September 1973	COS	/S/

CONFIDENTIAL

CONFIDENTIAL

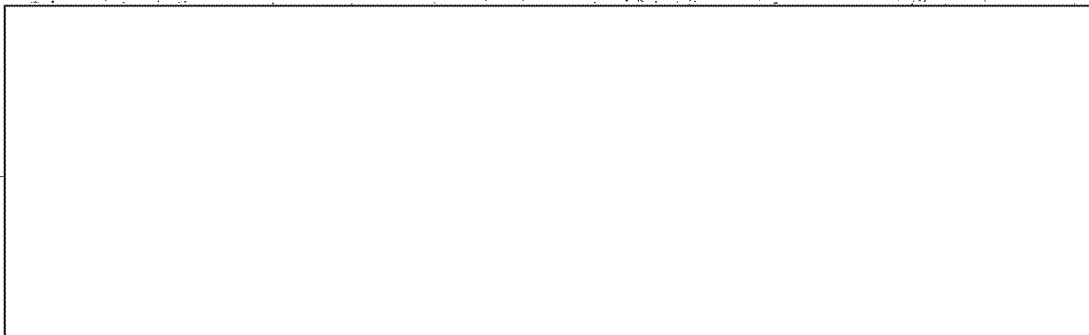
Section C. Narrative Comments (Continued)



CONFIDENTIAL.

Reviewing Comments
(Continued)

CONFIDENTIAL



CONFIDENTIAL

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SER	4. GRADE
				M	GS-13
6. OFFICIAL POSITION/TITLE			7. DATE OF ASSIGNMENT		
Ops. Officer			DDP/FE		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			30 November 1971 - 30 November 1972		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
M-Marginal		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.			
P-Proficient		Performance is satisfactory. Desired results are being produced in the manner expected.			
S-Strong		Performance is characterized by exceptional proficiency.			
O-Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					P
					RATING LETTER
					P
					RATING LETTER
					P
Prepare reports, correspondence and other management/administrative requirements.					RATING LETTER
					P
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits and habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					P

SECRET

FORM 8-11-67 1-1

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Monnet of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

24 November 1972

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

24 November 1972

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

DATE

24 November 1972

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

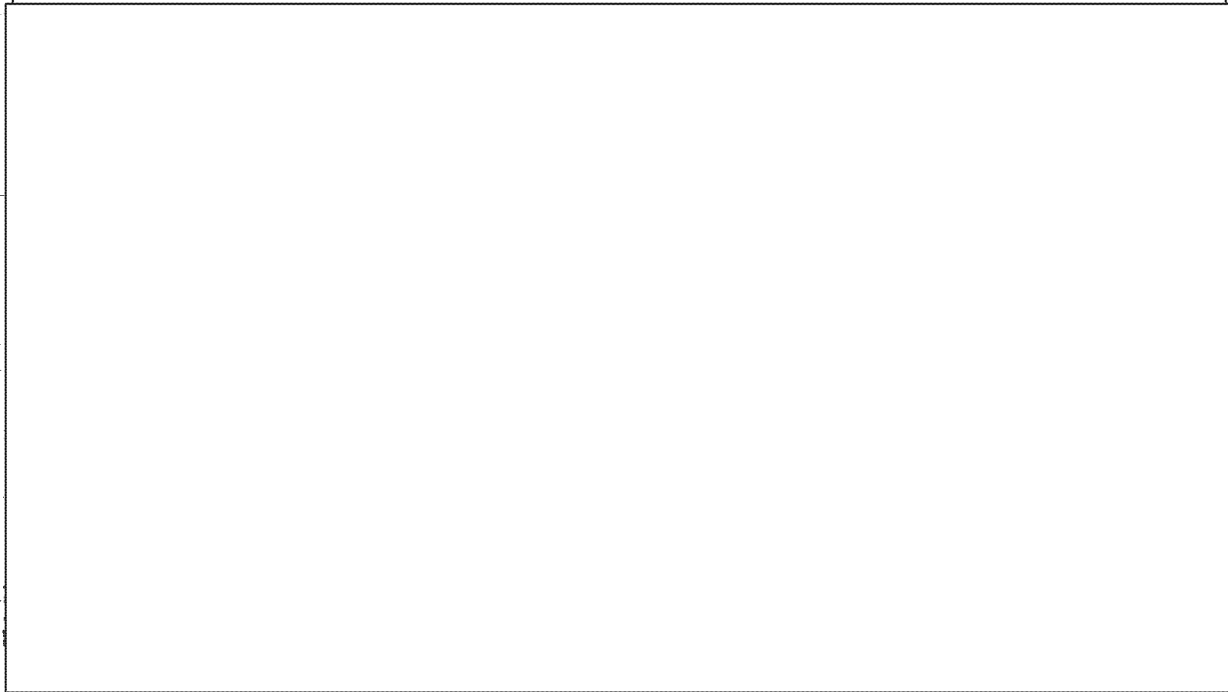
TYPED OR PRINTED NAME AND SIGNATURE

/s/

SECRET

S E C R E T

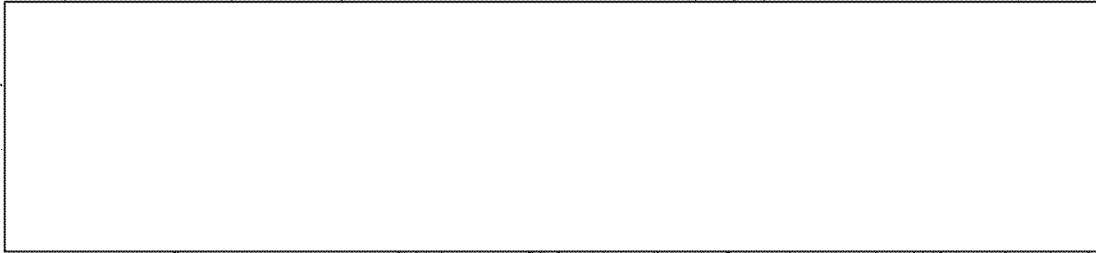
SECTION C - Narrative Comments (continued)



~~S-E-C-R-E-T~~

S E C R E T

SECTION D - Comments of Reviewing Official (continued)



S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
				M	09-13 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION
Ops. Officer			DDP/FE		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
28 February 1972			1 August 1971 - 31 December 1971		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
M-Marginal		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.			
P-Proficient		Performance is satisfactory. Desired results are being produced in the manner expected.			
S-Strong		Performance is characterized by exceptional proficiency.			
O-Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
					B
					RATING LETTER
					P
					RATING LETTER
					P
					RATING LETTER
					S
					RATING LETTER
					P
					RATING LETTER
					P
					RATING LETTER
					P
OVERALL PERFORMANCE					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position, such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

--

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

29 November 1971

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

29 November 1971

OFFICIAL TITLE OF SUPERVISOR

COS

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

--

DATE

02 DEC 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

CFE

TYPED

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX M	4. GRADE GS-13
				D	5. SS
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/FE		
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)			<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
10. SPECIAL (Specify):			11. SPECIAL (Specify):		
12. DATE REPORT DUE IN O.P.			13. REPORTING PERIOD (From to)		
			1 January 1971 - 30 July 1971		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
M-Marginal		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.			
P-Proficient		Performance is satisfactory. Desired results are being produced in the manner expected.			
S-Strong		Performance is characterized by exceptional proficiency.			
O-Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER S
2					RATING LETTER ly P
3					RATING LETTER S
4					RATING LETTER P
5					RATING LETTER P
6					RATING LETTER P
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place this letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p style="text-align: right;">Aug 20 11 00 AM '71</p>			
(Continued)			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
31 July 1971	/s/ []		
2. BY SUPERVISOR			
MONTHS EMPLOYEES HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
31 July 1971	Deputy Chief of Station	/s/ []	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
(Continued)			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
6 August 1971	Chief of Station	/s/ []	

SECRET

SECRET

NARRATIVE (Continued)



SECRET

S E C R E T

REVIEWING COMMENTS (continued)



S E C R E T

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYER SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE
				M	GS-13 D
5. OFFICIAL POSITION TITLE		7. OFF. DIV. OR OF ASSIGNMENT		8. CURRENT STATION	
Ops. Officer		DDP/FE			
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
28 February 1971			1 May 1970 to 31 December 1970		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.					
M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.					
P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.					
S-Strong Performance is characterized by exceptional proficiency.					
O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1: Station Communist Movement (CM) Officer responsible for functional coordination of overall program, including program guidance, analysis and research, and maintenance of central subject files pertinent to program targets (1 May - 10 August 1970).					RATING LETTER S
SPECIFIC DUTY NO. 2					RATING LETTER S
SPECIFIC DUTY NO. 3					RATING LETTER P
SPECIFIC DUTY NO. 4					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER P
Prepare reports, correspondence, and other management/administrative requirements.					RATING LETTER P
OVERALL PERFORMANCE IN CURRENT POSITION					
Use this segment to describe the employee which influences his effectiveness in his present position such as past experience of specific duties, proficiency, soundness of judgment, past performance of similar duties or tasks, and particular limitations or strengths. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

SECRET

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

5

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

12 February 1971

SIGNATURE OF EMPLOYEE

/s/ []

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

17 February 1971

OFFICIAL TITLE OF SUPERVISOR

DCG3

TYPED OR PRINTED NAME AND SIGNATURE

/s/ []

3.

BY REVIEWING OFFICIAL

DATE

17 February 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

SG3

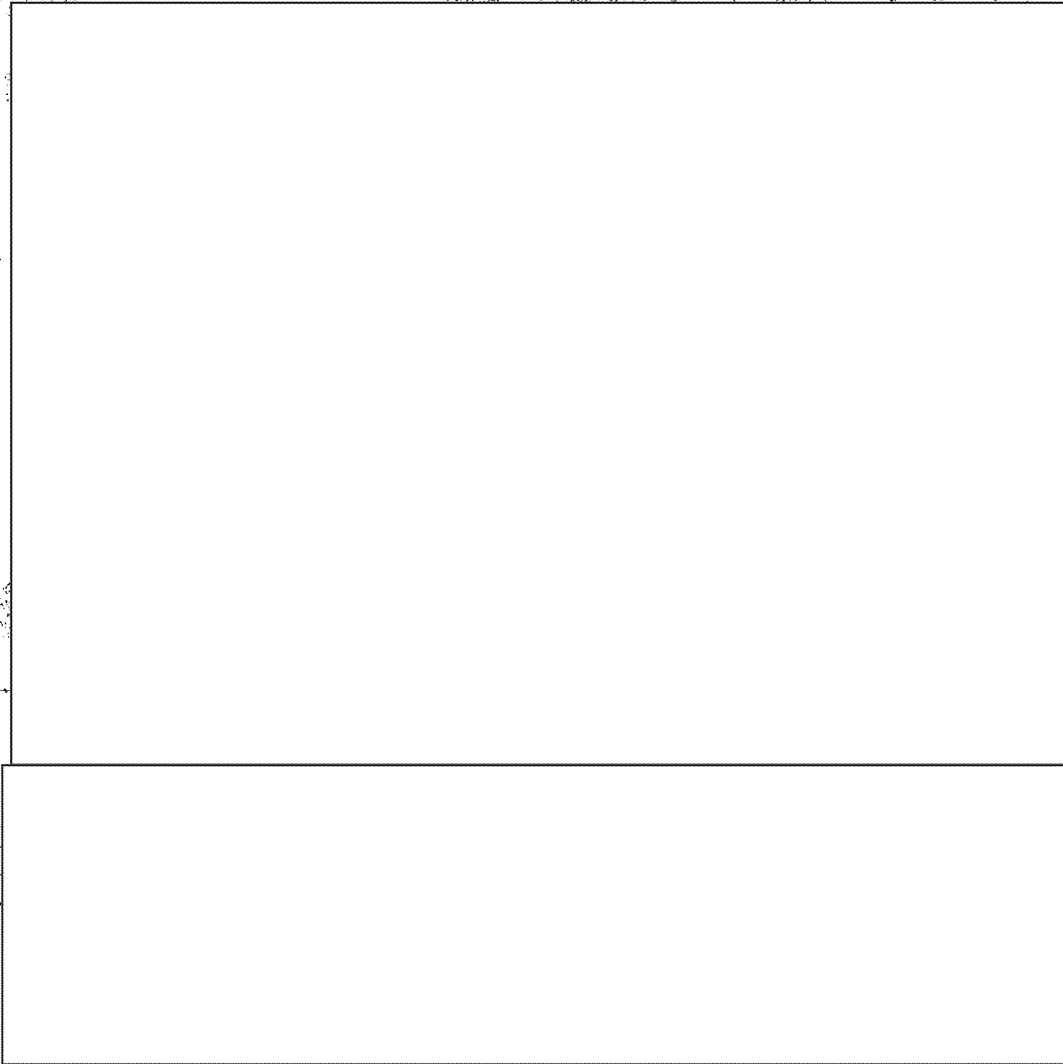
TYPED OR PRINTED NAME AND SIGNATURE

/s/ []

SECRET

S E C R E T

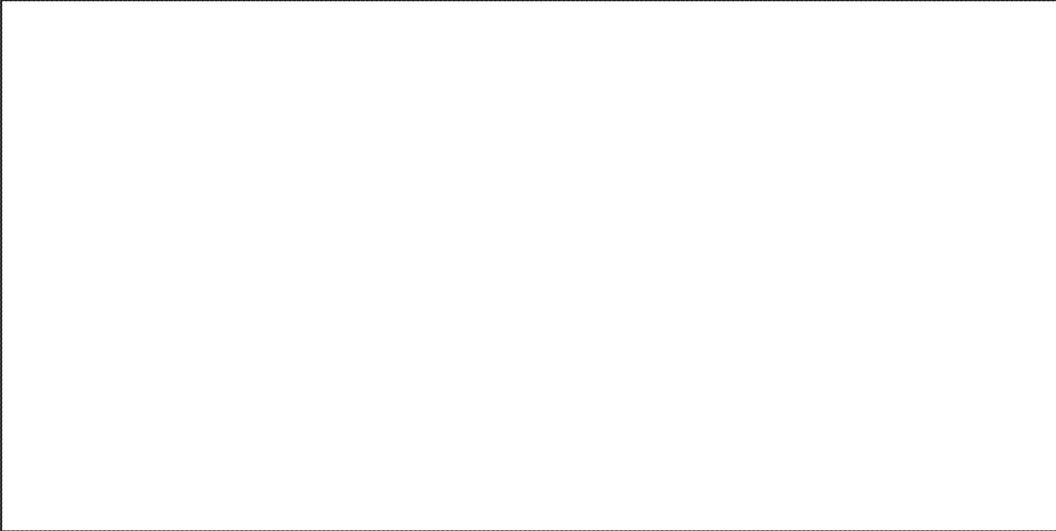
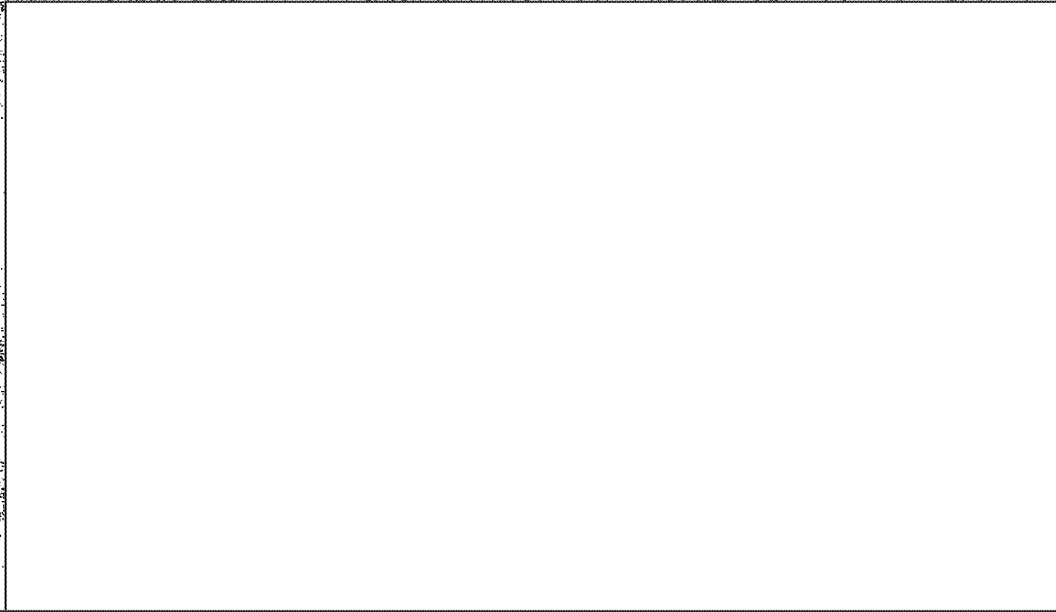
NARRATIVE (con'td)



S E C R E T

SECRET

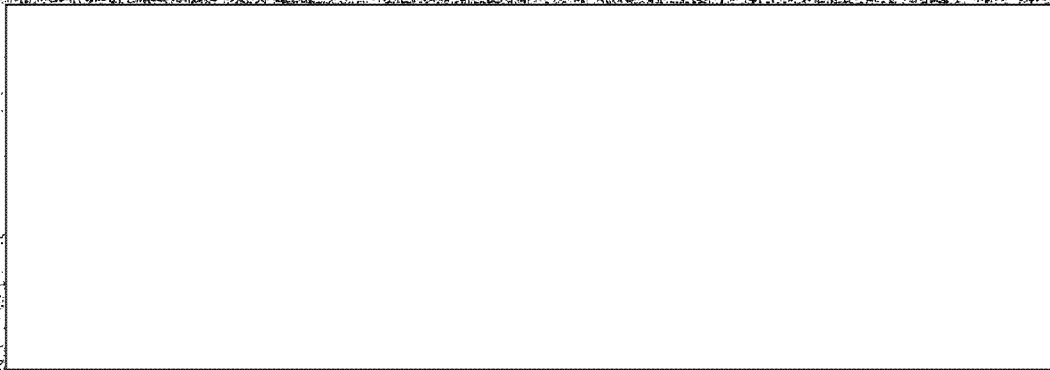
NARRATIVE (CON'TD)



SECRET

S E C R E T

NARRATIVE (CON'TD)



S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME First () Middle () Last ()		2. DATE OF BIRTH		3. SEX M	4. GRADE GS-13
5. OFFICIAL POSITION TITLE Ops Officer		7. OFF. DIV. OR OP. ASSIGNMENT DDP/FE/		6. SO D	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
10. CHECK (X) TYPE OF REPORT <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P. 28 February 1970		12. REPORTING PERIOD (From - to) 1 January 1970 - 30 April 1970			
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
SPECIFIC DUTY NO. 2					RATING LETTER
Managerial and supervisory conduct in performance of duties and cost consciousness in the use of own time, other personnel, equipment, funds and on-the-job initiative.					P
SPECIFIC DUTY NO. 3					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUN 16 3 10 PM '70

No substantive change from previous Fitness Report. The comments therein remain essentially valid. Subject will be acting capacity covering in the main the current supervisor's functional responsibilities for an interim period of over two months. Through a deliberately imposed trial period in preparation for this change, Subject has moved in strongly and with good judgment. The variation in Rating Letter grades reflects the longer period of assessment. Subject has improved demonstrably in approaches and initiative under Specific Duty No. 3; under Specific Duty No. 6 the current Supervisor has noted a tendency to be less than prompt in finalizing support actions so vital to liaison as such and our own support elements; finally, the present Supervisor finds room for improvement in the conduct of intra-Station relationships, but this is admittedly a highly subjective view. There remains no question about overall professionalism and capabilities.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
8 May 1970	/s/ []	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
12 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
8 May 1970	Opn Officer	/s/ []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>The reviewing comments made in the previous fitness report continue to apply for this brief rating period. For the same reasons stated therein, I would rate Subject in Duty #1 as Proficient and the overall grade of Proficient. Duty #1 is Subject's principal function assigned in his Letter of Instruction (LOI). During the past two weeks and for a two week period in mid April when Subject managed the [] and his cases all by himself, I have observed a distinct increase in his effectiveness. He has worked long and hard, has shown initiative and imagination, has kept DCOS/COS currently briefed, and has shown good judgment in the decisions he</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
22 May 1970	DCOS	/s/ []

SECRET

COMMENTS OF REVIEWING OFFICIAL

made and recommendations referred to DCOS/COS. Subject has been encouraged to continue to exploit these strengths, as well as to expedite the preparation of written reports as noted by the Rating Officer. I have no doubt that Subject can and will exploit his potential to the maximum capacity during the next rating period in order to increase his rating, his comparative standing among the Station's other GS-13 officers, and to fulfill more thoroughly the priorities in his LOI.

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		3. DATE OF BIRTH	2. SEX	4. GRADE	5. DD
			M	GS-13	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR/OP ASSIGNMENT		8. CURRENT STATION	
Operations Officer		DDP/FE			
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
21 February 1970			20 May 1969 - 31 December 1969		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					P
					RATING LETTER
					S
					RATING LETTER
					RATING LETTER
					P
SPECIFIC DUTY NO. 4 Managerial and supervisory conduct in performance of duties and cost consciousness in the use of own time, other personnel, equipment, funds and on-the-job initiative.					RATING LETTER
					S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					S

SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and staff consciousness in the use of personnel, assets, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject arrived at Station in May 1969 well prepared and took over from his predecessor in an organized and professional manner; there were no hitches, either in terms of personality conflicts or operational lag. He has since continued to demonstrate care in preparation and approach to what is a demanding and highly varied assignment; he "uses" his past experience with originality and selective aggressiveness, and more important, with a keen sense of adaptability to his operational environment. Subject is definitely not a clock-watcher and gives of his own time freely and at his own initiative. Subject's initiative in [redacted] is limited only by the broad scope of duties already assigned.

Section B Specific Duties are directly related to Subject's Letter of Instruction dated 26 May 1969. In discharging his responsibilities [redacted] which includes advice and guidance to other Mission intelligence components in addition to Station officers, Subject is limited only by the extent to which he is called on; he himself is thoroughly grounded and available for the discharge of this function. He

/continued ----/

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.		
DATE	SIGNATURE OF EMPLOYEE	
26 February 1970	/s/ [redacted]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
26 February 1970	Ops Officer	/s/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>Concur generally with ratings and narrative comments. Subject is a dedicated, responsive and methodical officer whose previous duty Station was Headquarters [redacted]. In a relatively brief period of time Subject has obtained a good knowledge of the [redacted] operational information. Probably because of the presence of knowledgeable senior ops officers at the Station, Subject has been somewhat reserved in executing his assigned responsibility [redacted]. I believe Subject could have been more vigorous in this primary area of responsibility. This may change when these officers are rotated this spring and summer. This matter has been discussed with Subject by COS/DCOS and encouraged him to assume a more aggressive and substantive</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
26 February 1970	DCOS	/s/ [redacted]

SECRET

SECRET

SECTION C - /continued --/

not necessarily conducive to easier relationships with local counterparts, Subject handles himself with professionalism, tact and understanding, well designed to absorb increasing sensitivities and still get the job done. Operational and performance consultations are held constantly -- daily on specifics and at least weekly on detailed performance and operational objectives. These sessions are frank and Subject is as much contributor as receiver, but he is distinctly receptive to realistic supervision and guidance for operational continuity. Subject is markedly security conscious, [redacted] and is perhaps overly cost conscious. His work in analysis and research in the complex [redacted] field, bringing together and collating viably positive intelligence (which otherwise be lost) in draft form is exemplary; his finished written work requires and is getting continuing attention. In fairness to Subject on latter point, he does very well in this area when adequate time is available to "finish" the product; on balance we prefer him active and mobile and can live with this marginal fault while evident efforts to improve continue. Overall, Subject is a well-rounded operations officer, a credit to the Agency and capable of larger responsibilities.

SECRET

SECRET

Reviewing Comments (continued)

role in suggesting operational ideas, levying tailored intelligence requirements, etc. to the various ops officers. Accordingly, for this rating period, I would rate Subject in Duty #1 at Proficient with an over-all rating of Proficient. Subject has the potential to increase his capability in the operations and ops management spheres. Subject and his rating officer work effectively as a team; consultations between them have produced some positive results.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
			M	GS-13	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Operations Officer		DDP/FE		Headquarters	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		1 January 1969 - 10 May 1969			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1					S
SPECIFIC DUTY NO. 2					S
SPECIFIC DUTY NO. 3					S
SPECIFIC DUTY NO. 4					S
Preparation and coordination of correspondence, studies, etc., in connection with Desk activities					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

During the reporting period [] has assumed greater responsibility as an Acting Desk Chief. As such he is responsible for the support of the operations of a large and active Station and for the direction of some eight employees either serving on this Desk or in process for the field. On balance he has done extremely well. His ability to express himself well verbally or in writing has stood him in good stead. His operational judgment is extremely good. He gets along well with his subordinates, delegates to them, and has obtained good production from them. He is highly cost conscious.

He has made progress in speeding up the preparation of his written material. After serving with him for some two years the undersigned is convinced that [] has considerable potential for further advancement as a manager and operations officer.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 28 April 1969	[]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 28/4/69	OFFICIAL TITLE OF SUPERVISOR ADC/FE []	TY []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
[] leaves shortly for an assignment [] He will be missed here since he assumed increasingly heavy responsibilities during his tenure on the Branch and performed in a responsible manner which clearly warrants the strong fitness report given him.		
DATE 29 APR 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL AC/FE []	[]

SECRET

SECRET

(When Filled In)

FITNESS REPORT		EMPLOYEE SERIAL NUMBER
SECTION A GENERAL		
1. NAME First: <input type="text"/> Middle: <input type="text"/> Last: <input type="text"/>	2. DATE OF BIRTH <input type="text"/>	3. SEX M <input checked="" type="checkbox"/> F <input type="checkbox"/>
4. OFFICIAL POSITION TITLE Operations Officer	5. OFF/DIV/BR OF ASSIGNMENT DDP/FE <input type="text"/>	6. GRADE GS-13
7. CHECK (X) TYPE OF APPOINTMENT		8. CHECK (X) TYPE OF REPORT
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER PROVISIONAL (See Instructions - Section C) <input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE
9. SPECIAL (Specify): <input type="text"/>		10. SPECIAL (Specify): <input type="text"/>
11. DATE REPORT DUE IN O.P. 31 January 1969		12. REPORTING PERIOD (From - To) 1 January 1968 - 31 December 1968
SECTION B PERFORMANCE EVALUATION		
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work, and in comparison to the performance of others doing similar work as to warrant special recognition.</p>		
SPECIFIC DUTIES		
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).		
SPECIFIC DUTY NO. 1	<input type="text"/>	RATING LETTER S
SPECIFIC DUTY NO. 2	<input type="text"/>	RATING LETTER S
SPECIFIC DUTY NO. 3	Preparation and coordination of correspondence, studies, etc. in connection with Desk Activities.	RATING LETTER P
SPECIFIC DUTY NO. 4	<input type="text"/>	RATING LETTER
SPECIFIC DUTY NO. 5	<input type="text"/>	RATING LETTER
SPECIFIC DUTY NO. 6	<input type="text"/>	RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION		
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.		RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Monitor of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

_____ is a bright, energetic and capable officer. At the same time, he is professionally sound in his judgement. He is thorough in reviewing and evaluating his programs and has a superior knowledge of his subject matter. He is cost conscious.

During the past year he has handled a very large work load. While his general performance has been exemplary, there have been, at times inordinate delays in completing a proportion of his written work, accounting, etc. _____ has been cautioned in this occasionally erratic performance, and it is expected that he will show marked improvement.

This officer is scheduled for assignment _____ in mid-1969.

_____ He is an extremely personable individual, who while intense does very well in social situations. He is a self starter, who needs little guidance. These factors should stand him in good stead.

In spite of occasional delays noted above, _____ was a very strong asset _____ during the past year. He remains a most capable officer with considerable potential career development.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 30 Dec 1968	SIGNATURE _____	
2. MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR CFE _____	TYPED OR PRINTED NAME AND SIGNATURE _____
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I believe the foregoing evaluation sums up the situation very well. _____ is an aggressive, capable, and experienced officer.		
DATE 2 January 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL DC/FE _____	TYPED OR PRINTED NAME AND SIGNATURE _____

SECRET

SECRET

TRAINING REPORT

NAME OF TRAINEE: [REDACTED]

COURSE: CI Operations

DOS [REDACTED]

HOURS: 80

OFFICE: FE SD: D

DATES: 25 Nov - 6 Dec '68

OBJECTIVE AND METHOD OF INSTRUCTION

Objectives

[REDACTED]

Method of Instruction

The course is presented by means of lecture, case study, and discussion.

ADJECTIVAL RATINGS OF ACHIEVEMENT

Adjectival Rating

- | | |
|--|-----------|
| 1. Demonstration of understanding of course concepts and materials. | Excellent |
| 2. Participation in class discussions. | Excellent |
| 3. Imaginative and practical application of operational principles to case studies and problems. | Good |
| 4. Industriousness. | Excellent |

COMMENT: [REDACTED] a very active student in discussions to which he contributed many helpful ideas. His presentation of the Wennerstroem Case was both objective and critical in terms of the available information on the case.

OVERALL adjectival rating of achievement: Excellent

FOR THE DIRECTOR OF TRAINING:

2 JAN 1969

Date

[REDACTED]
Chief Instructor

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
				M	GS-12 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/DR OF ASSIGNMENT		8. CURRENT STATION
Operations Officer			DDP/EE		Headquarters
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify)			<input type="checkbox"/> SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			7 April 1967 - 31 December 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

SECTION C NARRATIVE COMMENTS
 Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. State recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Dec 29 3 52 PM '67

[] is a thoroughly competent case officer who has been a major asset [] He has worked extremely hard with a minimum of supervision. He has not limited himself to his assigned duties, but has interested himself in other aspects of the Desk. In this regard he contributed considerably to the complete reorganization of the desk files.

In carrying out his duties he has been extremely thorough. His analysis of his cases has been excellent. While he writes clearly and meaningfully he still tends to be slow in handling correspondence. He will have to pay extra attention to this in his coming assignment []

[] is personable intelligent, and mature officer. He is a self starter who should do extremely well in his upcoming assignment.

[] has had no supervisory responsibilities during the period under review. He is commendably cost-conscious.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
 I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE 10 Dec 1967 SIGNATURE []

2. BY SUPERVISOR
 MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

5 months

DATE 14/12/67 OFFICIAL TITLE OF SUPERVISOR CFE [] TYPED []

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL: I concur with the Rating Officer's evaluations and comments. Prior to his assignment [] served under me on the []. While there he mastered with commendable speed a variety of complex operational matters and related subjects of interest. He could always be counted on to know his cases and come up with the facts. He is a sound professional who can be trusted to do a job with a minimum of supervision.

In view of his excellent performance since his assignment to this Branch, [] has been recommended for promotion to GS-13. He is also being programmed [] where his independence and self-reliance should stand him in good stead.

DATE 22 December 1967 OFFICIAL TITLE OF REVIEWING OFFICIAL DCFE/ [] SIGNATURE []

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. ID	
[Redacted]			[Redacted]	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF. DIV. OR OF ASSIGNMENT & CURRENT STATION				
Operations Officer			FE [Redacted] Hqs				
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR				
CAREER-PROVINCIAL (See Instructions - Section C)			ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE				
SPECIAL (Specify)			SPECIAL (Specify)				
11. DATE REPORT DUE IN G.P.				12. REPORTING PERIOD (From - to)			
				1 January - 7 April 1967			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider (X) if effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							RATING LETTER
<div style="border: 1px solid black; height: 150px; width: 100%;"></div>							S
							RATING LETTER
							S
							RATING LETTER
							S
<div style="border: 1px solid black; height: 50px; width: 100%;"></div>							P
							RATING LETTER
<div style="border: 1px solid black; height: 50px; width: 100%;"></div>							RATING LETTER
<div style="border: 1px solid black; height: 50px; width: 100%;"></div>							RATING LETTER
<div style="border: 1px solid black; height: 50px; width: 100%;"></div>							RATING LETTER
13 JUN 1967 OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal merits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							S

SECRET

(When Filled In)

SECTION C			NARRATIVE COMMENTS		
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of major duty or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p>					
<p>The comments noted in [redacted] previous Fitness Report to the effect that a little more experience [redacted] (to which he was assigned in mid-October 1963) should make him a strong member have been more than amply justified during this period. With minimum supervision or direction, [redacted] undertook the task of absorbing and systemitizing the complexities of [redacted]. The result has been increased comprehension on the part of Headquarters regarding these efforts.</p> <p>[redacted] also contributed materially in the way of preliminary operational research, support, recommendations and follow-through.</p> <p>[redacted]</p> <p>[redacted]</p> <p>[redacted] His performance in these functions was characterized by thoroughness and imagination.</p> <p>[redacted] is an extremely capable, intelligent officer with whom it is a genuine pleasure to serve, both professionally and personally. He is intellectually [redacted].</p> <p align="right">(Continued)</p>					
SECTION D			CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE					
I CERTIFY THAT I HAVE SPEN SECTIONS A, B, AND C OF THIS REPORT					
DATE	SIGNATURE	[redacted]			
25 May 1967	[redacted]				
2. BY SUPERVISOR					
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION				
Three					
DATE	OFFICIAL TITLE OF SUPERVISOR	[redacted]			
25 May 1967	Acting Chief, FE/ [redacted]				
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
<p>I would have rated [redacted] about the same. He at times suffers from an inability to articulate his thoughts clearly. There is no question of his professional grasp of his field, however. His feel for [redacted] operations is unusually sharp and he is capable of playing a significant ops role in a field assignment.</p>					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPE OF REVIEWER NAME AND SIGNATURE			
20 May 1967	Deputy Chief, FE/ [redacted]	[redacted]			

SECRET

SECRET

FITNESS REPORT - [REDACTED]

25 May 1967

SECTION C, NARRATIVE COMMENTS (Continued)

curious, has a probing mind and has the knack of quickly and accurately assessing a given situation. A diligent worker, he retains a good sense of humor and gets along well with his colleagues. He is inclined to become a bit impatient with the bureaucratic procedures at Headquarters, but has the maturity to subdue such feelings in the interests of expediency.

As for weak points, [REDACTED] has tended to be somewhat lax about answering correspondence, particularly when he felt them to be of marginal value. This has been pointed out to him, however, and he is effectively overcoming this defect.

During this period, [REDACTED] had no supervisory duties as such, although he assisted on an ad hoc basis in the supervision of a career trainee temporarily assigned to the [REDACTED] Desk. His performance here was promising and it is contemplated to assign him some supervisory responsibilities in the future.

[REDACTED] exhibits good cost consciousness.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME		(First) (Middle)	3. SER.	4. GRADE	5. SD
			M	12	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		
Ops Officer			DDP/FE		
8. CHECK (X) TYPE OF APPOINTMENT			9. CURRENT STATION		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			Hqs		
10. CHECK (X) TYPE OF REPORT					
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			October - December 1966		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
See Section C					
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
Jan 1967 <i>[Signature]</i>					
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					P

SECRET
(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject has been assigned to the [redacted] Desk since mid-October 1966, consequently evaluation of performance of specific duties at this point would not be based upon representative evidence.

During the very brief interval Subject has been with the desk, he has shown several consistent qualities that deserve noting. Assigned the [redacted] operations sector, he applied himself to background reading, files research and organizing his materials, with commendable energy. He has accepted a variety of spot assignments requiring timely response, shown considerable initiative in locating the necessary facts, and met the required deadlines without undue assistance or observation. He shows every evidence of absorption in his assigned field. A little more experience with the country, Headquarters procedures and local conventions should make him a strong member of the desk.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

15 December 1966

SIGN

2.

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

Oct - Dec 1966

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

15 Dec 1966

OFFICIAL TITLE OF SUPERVISOR

CPE/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur.

DATE

20 December 1966

OFFICIAL TITLE OF REVIEWING OFFICIAL

Deputy Chief, FE/ [redacted]

SIGNATURE

SECRET

S-E-C-R-E-T

TRAINING REPORT

Operations Course No. 4
80 hours, full time 18 - 19 March 1968

Student : Office : DDP/FE

Year of Birth: Service Designation: D

Grade : GS-12 No. of Students : 32

EOD Date : 1955

COURSE OBJECTIVES

To orient the student on the special nature of the
Clandestine Services' target and to train him
in the application of clandestine methods for collecting
information on, assessing, and preparing recruitment oper-
ations

ACHIEVEMENT RECORD

This is a certificate of attendance. No evaluation is
made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:

Instructor, OTR

S-E-C-R-E-T

14-00000

S-E-C-R-E-T

TRAINING REPORT

[] FAMILIARIZATION NO. 34
(40 hours, full-time)

26 February - 1 March 1968

Name : []

No. of Students: 17

Office : FE

ED : D

Year of Birth: []

Grade : GS-12

BOB Date : June 1955

COURSE OBJECTIVES - CONTENT AND METHODS

[]

ACHIEVEMENT RECORD

The above named student actively participated in the [] Familiarization Course No. 34. In this session no evaluation was attempted for the area phase. The student's performance in the language familiarization phase was satisfactory .

FOR THE DIRECTOR OF TRAINING:

[]
Chief Instructor

5 March 1968
Date

GROUP 1
Excluded from automatic
downgrading and
declassification

S-E-C-R-E-T

SECRET

TRAINING REPORT

 Operations Course No. 1-68
40 hours, full time 4 - 8 March 1968

Student :

Office : YE

Year of Birth:

Service Designation: D

Grade : GS-12

No. of Students : 25

EOD Date : June 1955

COURSE OBJECTIVE

ACHIEVEMENT RECORD

This is a certificate of attendance. No record is made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:

 5 MAR 1968
Date
Chief Instructor

SECRET

S-E-C-R-E-T

TRAINING REPORT

Chiefs of Station Seminar No. 68

80 hours, full time 5 - 16 February 1968

Participant :

Office :

Year of Birth:

Service Designation:

Grade : GS-12

No. of Students : 18

EOD Date : 1955

COURSE OBJECTIVES, CONTENT AND METHODS

The COS Seminar is aimed to prepare prospective Chiefs and Deputy Chiefs of Station and Chiefs of Base for field assignments. Emphasis was upon the difficulties confronting Chiefs of small or medium-sized installations, since they must handle a peculiarly wide range of problems. Included were case studies serving to remind outgoing chiefs of various operational approaches and techniques, but more time was devoted to policy, coordination, management, reporting, and administrative responsibilities of the Chief of Station, both within CIA and in the government at large, at home and abroad.

The bulk of the course is given in lectures and question periods conducted by officials responsible for the missions, functions, programs, and services discussed. A few key items of suggested reading are included, and bibliographies of suggested reading tailored to the individual's assignment are offered for those who want them.

ACHIEVEMENT RECORD

This is a certificate of attendance. No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:

20 FEB 1968

Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORT

Information Reporting, Reports and Requirements Course No. 2 - 68
LEO Hours, full time - 20 February 1968

Student : Office :
Year of Birth: Service Designation:
Grade : OS-12 No. of Students : 5
EOD Date : 1955

COURSE OBJECTIVES - CONTENT AND METHODS

The over-all objectives of the course are: to show the requirements function as it develops; to describe information evaluation, appraisal, and dissemination; to present fundamental principles of collection and communication of information; to demonstrate how, through Headquarters guidance, reporters can be directed and developed; and to prepare intelligence officers in the field to put information into finished report form. Supervised practice to develop skills is given in the production of finished reports; in reporting on area guidance patterns; in tailoring requirements into specific assignments; and in observing, collecting, organizing, and communicating information.

ACHIEVEMENT RECORD

Student achievement is judged from each student's observed performance during laboratory practice in the areas of instruction indicated. An asterisk (*) indicated this student's ratings. The ratings are weak, adequate, proficient, strong, and outstanding.

A. Qualitative and Quantitative Production of Reports:

Weak Adequate Proficient Strong Outstanding

COMMENT: The quality of work was uniformly excellent in every respect. He worked to full capacity.

B. Requirements Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His paper on this subject demonstrated that he has a very sound understanding of the Requirements and guidance systems.

S-E-C-R-E-T

S-E-C-R-E-T

C. Editorial Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His work demonstrated that he has acquired a very sound understanding of the principles of good editorial organization in intelligence reporting.

D. Reporting Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His outside reporting assignment was efficiently executed. It was well organized. Unfortunately, it lacked sufficient reporting detail to warrant a higher rating.

INSTRUCTOR'S OVER-ALL COMMENT:

[] was a very fine student. He worked extremely well and his many penetrating questions added very considerably to the tone of the class. His work was of excellent quality and it showed that he has acquired a sound understanding of the various aspects of the reporting function discussed.

FOR THE DIRECTOR OF TRAINING

[]

Chief Instructor

1 FEB 1968
Date

S-E-C-R-E-T

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
SECTION A				GENERAL		
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
				M	GS-12	D
6. OFFICIAL POSITION TITLE			7. OFFICE OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer			DDP/EE/VHC		Vietnam	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify):			
CAREER-PROVISIONAL (See instructions - Section C)			REASSIGNMENT SUPERVISOR			
SPECIAL (Specify):			REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)			
			1 January - 9 July 1966			
SECTION B						
PERFORMANCE EVALUATION						
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1						RATING LETTER
The initiation, development and management of a sensitive FI/CI operation.						S
SPECIFIC DUTY NO. 2						RATING LETTER
The spotting, assessment, development, recruitment and management of unilateral FI agents.						S
SPECIFIC DUTY NO. 3						RATING LETTER
Functions as a liaison officer with officials of the Vietnamese National Police.						P
SPECIFIC DUTY NO. 4						RATING LETTER
The preparation of dispatches, cables, intelligence information reports, memoranda and other necessary papers required by the above duties.						A
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

1. This employee has been under the supervision of [redacted] rating officer for a period of four months. During that time he has displayed the professional qualities of a competent and knowledgeable operations officer.
2. During his tour at this Station, Subject was responsible for the initiation and development of a highly sensitive and productive FI/CI operation. His management of this project in its early stages, which has included its evolution into [redacted], has been performed in a highly commendable manner, and the Project has now reached the point where its future potential appears to be substantial. Subject has demonstrated his capability in the area of [redacted] and management through the [redacted] during his present tour. He has carried out a variety of liaison duties with various elements of the National Police efficiently and capably.
3. Subject has shown the capacity properly to place his own activities within the perspective of the Station's mission. In this respect he has devoted considerable effort to acquiring a solid background of area familiarization and knowledge which has enabled him to function in a highly effective fashion.
4. This employee has shown a high degree of cost consciousness in his approach to his duties. Employee has not had supervisory responsibilities.
5. Subject has sometimes shown a lack of sufficient emphasis in properly recording the progress of his operational activities through the normal reporting procedures. Subject is now aware of this, and it is believed that this will not be a problem in the future.
6. This employee is a well-motivated, highly capable officer with excellent career potential. This supervisor would be pleased to serve with him again.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.		
DATE	SIGNATURE OF EMPLOYEE	
8 July 1966	[redacted] (s)	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
8 July 1966	Ops Officer	[redacted] (s)
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p align="center">I concur in the above.</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
8 July 1966	Chief of LB	[redacted] (s)

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
			M	GS-12	D
6. OFFICIAL POSITION TITLE		7. ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/NSA		Saigon	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
Feb 66			29 December 1964 to 31 Dec 1965		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Officer in charge of liaison with the Municipal Police DES					RATING LETTER P
SPECIFIC DUTY NO. 2 Officer in charge of liaison					RATING LETTER S
SPECIFIC DUTY NO. 3 Officer in liaison with operational components of Headquarters, Special Branch					RATING LETTER P
SPECIFIC DUTY NO. 4 Handles all the correspondence, files and associated memoranda connected with the tasks cited above.					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

OFFICE OF PERSONNEL

FEB 15 10 45 AM '66

During the reporting period this officer was given different assignments due to a reorganization within the branch. During the past two months he has been solely responsible for liaison with [redacted] and has developed this into a very worthwhile activity. In addition to this effort he has been personally responsible for [redacted] of both short and long range interest. He has handled an area of extreme sensitivity which called for unremitting attention to detail. He accomplished this assignment in an outstanding manner. This officer is rated on the overall as proficient.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.

DATE

SIGNATURE OF EMPLOYEE

1 Feb 66

/s/ [redacted]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

1 Feb 66

Ops Officer

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the above.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

1 Feb 66

Ops Officer

/s/ [redacted]

SECRET

SECRET
(When Filled In)

TRAINING REPORT - LANGUAGE				COURSE TITLE			
				French Inter. - EW - Ph I			
INSTRUCTOR				PROGRAM			
				Daytime - Part-time			
NO. OF STUDENTS		NO. OF HOURS		DATE OF COURSE			
1		60		05/04/64 - 07/20/64			
STUDENT							
NAME		YOB	DOB DATE	OFFICE		GS	SD
		28	06/55	FB		12	D
(See reverse side for definitions of proficiency levels)							
LEVEL OF PROFICIENCY AT ENTRY INTO TRAINING				<input checked="" type="checkbox"/> INSTRUCTORS ESTIMATE		OFFICIAL TEST	
	NO PROFICIENCY	SLIGHT	ELEMENTARY	INTERMEDIATE	HIGH		
SKILLS	READING			<input checked="" type="checkbox"/>			
	WRITING			<input checked="" type="checkbox"/>			
	PRONUNCIATION			<input checked="" type="checkbox"/>			
	SPEAKING		<input checked="" type="checkbox"/>				
	UNDERSTANDING		<input checked="" type="checkbox"/>				
LANGUAGE TRAINING OBJECTIVES AND METHODS							
<p>The general aims of language training are attainment of proficiency in speaking, understanding, reading and writing. The specific objectives are: (1) ability to produce and distinguish the sounds of the language; (2) ability to use a stock of basic sentences and expressions; (3) ability to recombine the elements of basic sentences and expressions and to apply them to new situations; (4) ability to comprehend the language spoken at normal speed in various situations; (5) ability to write and read the language commensurate with ability to speak.</p> <p>Methods used in all courses stress oral drills and free conversation based at first on memorized material and, at a later stage, on varied reading materials. Written and oral tests are given at intervals. Listening to and recording on tapes in the Language Lab is essential for class preparation.</p>							
PERFORMANCE EVALUATION							
	UNSATISFACTORY		SATISFACTORY		EXCELLENT		
ACHIEVEMENT			<input checked="" type="checkbox"/>				
ATTITUDE			<input checked="" type="checkbox"/>				
ATTENDANCE			<input checked="" type="checkbox"/>				
LEVEL OF PROFICIENCY AT COMPLETION OF TRAINING				<input checked="" type="checkbox"/> INSTRUCTORS ESTIMATE		OFFICIAL TEST	
	NO PROFICIENCY	SLIGHT	ELEMENTARY	INTERMEDIATE	HIGH		
SKILLS	READING				<input checked="" type="checkbox"/>		
	WRITING			<input checked="" type="checkbox"/>			
	PRONUNCIATION			<input checked="" type="checkbox"/>			
	SPEAKING			<input checked="" type="checkbox"/>			
	UNDERSTANDING			<input checked="" type="checkbox"/>			
<p>Foreign Language Aptitude Test: 6</p> <div style="border: 1px solid black; width: 200px; height: 40px; margin: 10px auto;"></div>							
FOR THE DIRECTOR OF TRAINING:				25 Mar 64 DATE			

1-80 2222

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(45)

S E C R E T

TRAINING REPORT

[illegible]

ACHIEVEMENT RECORD

This is a certificate of attendance. Adjectival ratings are not given in this course.

FOR THE DIRECTOR OF TRAINING:

Chief Instructor

22 April 1961
Date

Group I
Excluded from automatic
downgrading and
declassification

S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEA	4. GRADE
				M	GS-12
5. OFFICIAL POSITION TITLE			7. OFF/DIVISION OF ASSIGNMENT	8. CURRENT STATION	
Ops Officer			DDP/EE/	Headquarters	
9. CHECK IN TYPE OF APPOINTMENT			10. CHECK IN		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORT PERIOD (From - to)		
January 1964			April - 31 January 1964		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Assembles available information on North Vietnam, and its diplomatic establishments abroad.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Acts as [] officer for Vietnam Desk.					P
SPECIFIC DUTY NO. 3					RATING LETTER
Aids in giving operational support to denied areas ops program run by Saigon Station.					P
SPECIFIC DUTY NO. 4					RATING LETTER
Prepares periodic reports on progress of denied area ops program.					S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
17 MAR 1964					P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

During the period covered by this report, [] is [] has been assigned as an operations officer in the DD/P, having transferred from the DD/I in April 1963. [] has made this transition very well, and has adjusted himself to the operating tempo and atmosphere of a busy desk. He is now a competent and flexible case officer, making a valuable contribution to his desk and branch. For the past month, he has served very capably as acting chief of the North Vietnam element of the desk during the absence of another officer.

[] was quick to recognize the difference between his present assignment and those previous to it. This difference has required some changes on his part, in terms of emphasis and flexibility. [] has graciously accepted guidance given him during this period, and has developed into an efficient DD/P officer.

[] assignment involves partial supervision of two junior officers. He directs these officers effectively, and in a natural manner, giving promise of considerable supervisory capability which future assignments can develop.

Following some additional time on the desk, during which time it is expected that [] will assume more responsibility for the North Vietnam program, it is planned to send him to the field, as his performance on the desk would indicate that he is fully capable of an operational field assignment.

* [] supervisory duties have not been directly related to fiscal matters. However, he has revealed a normal degree of cost consciousness in those budgetary matters with which he has come in contact.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

18 February 1964

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

10

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

18 February 1964

OFFICIAL TITLE OF SUPERVISOR

Chief, FE/ []

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur in supervisor's comments. I have observed this officer since early May 1963 and I believe he has developed steadily in the operations field, a field new to him. After another six to nine months on the desk, he should be ready for his first ops assignment abroad, hopefully in Saigon working on the North Vietnam program. He is showing the earmarks of a well-rounded, thoughtful case officer and we should not delay too long in getting him to the field in a real operational situation.

DATE

9 March 1964

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, FE/ []

TY

SECRET

SECRET

(When Filled In)

FITNESS REPORT

FILED SERIAL NUMBER

017774

SECTION A

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
		M	GS-12	IR
6. OFFICIAL POSITION TITLE	7. OFF. DIV. OR ASSIGNMENT	8. CURRENT ASSIGNMENT		
ID	DDP/YE			
9. CHECK (X) TYPE OF APPOINTMENT	10. CHECK (X) TYPE OF REPORT			
CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/>	INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/>			
CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/>	X ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/>			
SPECIAL (Specify):	SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From To)			
	1 Jan 62 - 23 September 1962			

SECTION B

PERFORMANCE EVALUATION

- W - Weak** Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- A - Adequate** Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- P - Proficient** Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- S - Strong** Performance is characterized by exceptional proficiency.
- O - Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SP		RATING LETTER
		S
SP		RATING LETTER
		S
SP		RATING LETTER
		S
SP		RATING LETTER
		A
SP		RATING LETTER
		A
SP		RATING LETTER
		P
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.		RATING LETTER
		P+

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject during his tour of duty at this station demonstrated a thorough knowledge of the [redacted] program and was sincere and competent in performing his duties. The establishment of the joint center [redacted] was a creditable achievement which should make an important contribution to the program in the years to come. He was cooperative and willing to undertake additional duties when requested. He has done an outstanding job in the training of both ODYOKE and [redacted].

The reporting officer feels that Subject has a tendency to procrastinate and that on a few occasions he did not follow through on his commitments as aggressively as he might have. This, however, was the only weakness noticed in an otherwise competent performance.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

4/23/63

SIGNATURE OF

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

15 MONTHS

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION *FR shown to employee 4/23/63*

HAS ALREADY DEPARTED TO NEW POST

DATE

19 Oct 1962

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

COPIES.

DATE

22 Oct 1962

OFFICIAL TITLE OF REVIEWING OFFICIAL

8 C.C.S.

TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
			M	GS-12	D
6. OFFICIAL POSITION/TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/FE		Headquarters	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
January 1984			April - 31 January 1984		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Assembles available information on North Vietnam, and its diplomatic establishments abroad.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Acts as [] officer for Vietnam Desk.					P
SPECIFIC DUTY NO. 3					RATING LETTER
Aids in giving operational support to denied areas ops program run by Saigon Station.					P
SPECIFIC DUTY NO. 4					RATING LETTER
Prepares periodic reports on progress of denied area ops program.					S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

During the period covered by this report, [] has for the first time been assigned as an operations officer in the DD/P, having transferred from the DD/I in April 1963. [] has made this transition very well, and has adjusted himself to the operating tempo and atmosphere of a busy desk. He is now a competent and flexible case officer, making a valuable contribution to his desk and branch. For the past month, he has served very capably as acting chief of the North Vietnam element of the desk, during the absence of another officer.

[] was quick to recognize the difference between his present assignment and those previous to it. This difference has required some changes on his part, in terms of emphasis and flexibility. [] has graciously accepted guidance given him during this period, and has developed into an efficient DD/P officer.

[] assignment involves partial supervision of two junior officers. He directs these officers effectively, and in a natural manner, giving promise of considerable supervisory capability which future assignments can develop.*

Following some additional time on the desk, during which time it is expected that [] will assume more responsibility for the North Vietnam program, it is planned to send him to the field, as his performance on the desk would indicate that he is fully capable of an operational field assignment.

[] supervisory duties have not been directly related to fiscal matters.

However, he has revealed a normal degree of cost consciousness in those budgetary matters with which he has come in contact.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE 18 February 1964	SIGNATURE []
--------------------------	------------------

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
---	---

10	
----	--

DATE 18 February 1964	OFFICIAL TITLE OF SUPERVISOR Chief, FE []	TYPED OR PRINTED NAME AND SIGNATURE []
--------------------------	---	--

DATE 18 February 1964	OFFICIAL TITLE OF SUPERVISOR Chief, FE []	TYPED OR PRINTED NAME AND SIGNATURE []
--------------------------	---	--

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Lane
Concur in supervisor's comments. I observed this officer since early May 1963 and I believe he has developed steadily in the operations field; a field new to him. After another six to nine months on the desk, he should be ready for his first ops assignment abroad, hopefully in Saigon working on the North Vietnam program. He is showing the earmarks of a well-rounded, thoughtful case officer and we should not delay too long in getting him to the field in a real operational situation.

DATE 9 March 1964	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, FE/ []	TYPED OR PRINTED NAME AND SIGNATURE []
----------------------	--	--

9 March 1964	Chief, FE/ []	[]
--------------	----------------	-----

SECRET

4 F-27

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX		
					4. GRADE USB		
5. SERVICE DESIGNATION			6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		
8. CAREER STAFF STATUS			9. TYPE OF REPORT				
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE				
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		12. SPECIAL (Specify)			
		From 15 Apr 61 to 31 Dec 61					
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding							
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.							
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. 5		
SECTION D DESCRIPTION OF THE EMPLOYEE							
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.							
1 - Least possible degree 2 - Limited degree 3 - Normal degree 4 - Above average degree 5 - Outstanding degree							
CHARACTERISTICS	NOT APPLICABLE	NOT OBSERVED	RATING				
			1	2	3	4	5
GETS THINGS DONE						X	
RESOURCEFUL							X
ACCEPTS RESPONSIBILITIES						X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X
DOES HIS JOB WITHOUT STRONG SUPPORT							X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X	
WRITES EFFECTIVELY					X		
SECURITY CONSCIOUS					X		
THINKS CLEARLY						X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X		
OTHER (Specify):							

SEE SECTION "E" ON REVERSE SIDE

SECRET

(When Filled In)

OFFICE

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for assignment and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

This officer continues to perform his duties in a highly efficient manner, showing diligence and initiative. He has successfully coordinated the activities of the ODJKE intelligence community in the [] field, and has succeeded in keeping this an active and rewarding program. He has been cooperative at all times, and has willingly assumed additional duties, particularly in assisting the Branch Chief in handling [] problems and requirements. He has established good working relationships with the ODJKE agencies in the field, and has twice during this period received letters of appreciation from other agencies for the high calibre of training which he has conducted. No specific weaknesses have been noted, and no special training is recommended at this time.

SECTION F

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 31 December 61	SIGNATURE OF EMPLOYEE [] (Signed)	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 7	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
DATE 31 December 61	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE [] (Signed)
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE 31 Dec. 61	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE [] (Signed)

SECRET

SECRET

Continuation of Section B:

Specific Duty No. 3

collection techniques [REDACTED]

Specific Duty No. 4

.. KUDOVs elements, particularly [REDACTED]

SECRET

SECRET
(When Filled In)

[Signature]

FITNESS REPORT						EMPLOYER SERIAL NUMBER <small>(When Filled In)</small>					
SECTION A GENERAL											
1. NAME <small>(Last) (First) (Middle)</small> [] [] []			2. DATE OF BIRTH [] [] [] [] [] []		3. SEX Male		4. GRADE GS-11				
5. SERVICE DESIGNATION IR		6. OFFICIAL POSITION/TITLE NO			7. OFF/DIV/GR OF ASSIGNMENT						
8. CAREER STAFF STATUS <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING				9. TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE							
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD From Sept 59 To Apr 61		12. SPECIAL (Specify)							
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES											
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).											
<div style="display: flex; justify-content: space-between; font-size: small;"> 1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding </div>											
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION											
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.											
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. <div style="font-size: 2em; margin-top: 10px;">5</div>				
SECTION D DESCRIPTION OF THE EMPLOYEE											
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.											
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree			
CHARACTERISTICS						NOT APPLICABLE		NOT OBSERVED		RATING	
GETS THINGS DONE										1 2 3 4 5	
RESOURCEFUL										X	
ACCEPTS RESPONSIBILITIES										X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES										X	
DOES HIS JOB WITHOUT STRONG SUPPORT										X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE										X	
DRIVES EFFECTIVELY										X	
IS SOCIALLY CONSCIOUS										X	
THINKS CLEARLY										X	
DISCIPLINED IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS										X	
OTHER (Specify)											
SEE SECTION "E" ON REVERSE SIDE											

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

The undersigned's assessment of subject officer continues essentially the same as stated in the previous fitness report.

During the 18 months this officer has performed his duties [redacted] he has carried on and, with marked success, built upon the program organized by his predecessor. Subject officer by diligent effort and by demonstrating outstanding competence and expertise in the [redacted] field has successfully established himself as the focal point for the [redacted] within both the Station and the ODYKE intelligence community. He has established and maintained excellent working relations with all ODYKE intelligence components having an interest and/or capability [redacted]. His status insures the maximum coordinated effort in this field with resultant benefits to the entire intelligence community. The thoroughness and effectiveness with which I believe [redacted] is being carried out in the [redacted] area is strong testimonial for the caliber of subject officer's performance.

Subject officer has demonstrated high devotion to duty and complete willingness to undertake any task, no matter how difficult or inconvenient, which would contribute to the [redacted]. In addition, he has voluntarily undertaken to look after the broader interests of [redacted] with both KUDOVE and ODYKE military intelligence components in this area. In the performance of his duties subject officer has also displayed a high degree of initiative and self-reliance, as well as mature judgment in assessing the goals of his program and devising and implementing all measures necessary to achieve them.

With regard to subject officer's current assignment and performance I have no weaknesses to note. From the point of view of his career development I do recommend further training.

SECTION F CERTIFICATION AND COMMENTS

(continued)

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 14 April 1961	SIGNATURE OF EMPLOYEE [redacted] (Signed)	This report has been prepared in accordance with F.E. Division standards which require that the individual being evaluated be given the opportunity to review the report and to make corrections if necessary.
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 18	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION.	EXPLANATION: [redacted]
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):		
DATE 14 April 1961	OFFICIAL TITLE OF SUPERVISOR Chief, SIB	TYPED OR PRINTED NAME AND SIGNATURE [redacted]
3. BY REVIEWING OFFICIAL		
I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL I am not, of course, as familiar with Subject's work as in the past, but I cannot help but question what I consider the extremely high ratings given here. True, we have no person performing comparable duties in the station, but we have few, if any, officers here who consistently perform at this high level. In my dealings with Subject, I have been struck by his high motivation and devotion to duty. On the other hand, I have not been favorably impressed by his failure to handle promptly his [redacted] (cont'd)		
DATE 14 Apr 1961	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE [redacted]

SECRET

Continuation of Section B:

Specific Duty No. 3

collection techniques

Specific Duty No. 4

KUDOV elements,

Continuation of Section E:

and experience in the broader, analytical aspects of the KUCHAP area, including language and area studies.

Continuation of Section F-3:

normal administrative responsibilities.

SECRET
(When Filled In)

2016

FITNESS REPORT						EMPLOYEE SERIAL NUMBER					
SECTION A GENERAL											
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE					
5. SERVICE DESIGNATION 6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT								
8. CAREER STAFF STATUS			9. TYPE OF REPORT								
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE								
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD To SPECIAL (Specify)								
			From 4 Sept 59 30 Sept 60 Promotion								
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES											
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employee supervised).											
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding											
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION											
collection techniques applicable to the... Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.											
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.						RATING NO. <div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto; line-height: 30px;">5</div>					
SECTION D DESCRIPTION OF THE EMPLOYEE											
In the rating boxes below, check (X) the degree to which each characteristic applies to this employee											
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree			
CHARACTERISTICS					NOT APPLICABLE	NOT OBSERVED	RATING				
							1	2	3	4	5
GETS THINGS DONE											
RESOURCEFUL											
ACCEPTS RESPONSIBILITIES											
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES											
DOES HIS JOB WITHOUT STRONG SUPPORT											
FACILITATES SMOOTH OPERATION OF HIS OFFICE											
WRITES EFFECTIVELY											
SECURITY CONSCIOUS											
THINKS CLEARLY											
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS											
OTHER (Specify):											

SEE SECTION "E" ON REVERSE SIDE

Continuation of Section E:

In recognition of subject officer's outstanding performance to date and in view of the considerable responsibilities incident to the post of representative in this area, I recommend that subject officer be promoted to the grade of GS-12 as soon as possible.

SECRET 24 AUG 1959
(When Filled In)

24-1-59

FITNESS REPORT						EMPLOYEE SERIAL NUMBER			
SECTION A GENERAL									
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX Male		4. GRADE GS-11		
5. SERVICE DESIGNATION IR			6. OFFICIAL POSITION-TITLE IO			7. OFF/DIV/GR OF ASSIGNMENT ORR-			
8. CAREER STAFF STATUS				9. TYPE OF REPORT					
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED				<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR					
<input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED				<input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P. 31 Oct 1959			11. REPORTING PERIOD 15 Mar 58 - 30 Sep 1959		12. SPECIAL (Specify)				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES									
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).									
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent			
5 - Excellent		6 - Superior		7 - Outstanding					
SPECIFIC DUTY NO. 1 Prepares written reports on results of analysis.			RATING NO. 3		SPECIFIC DUTY NO. 4 Directs and participates in field exploitation.			RATING NO. 4	
SPECIFIC DUTY NO. 2 Derives significant intelligence from factory markings data.			RATING NO. 4		SPECIFIC DUTY NO. 5 Organizes raw data into analytic file.			RATING NO. 5	
SPECIFIC DUTY NO. 3 Supervises junior analyst.			RATING NO. 4		SPECIFIC DUTY NO. 6			RATING NO.	
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION									
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. 3		
SECTION D DESCRIPTION OF THE EMPLOYEE									
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee									
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree	
CHARACTERISTICS				NOT APPLI- CABLE		NOT OB- SERVED		RATING	
GETS THINGS DONE								1 2 3 4 5	
RESOURCEFUL								X	
ACCEPTS RESPONSIBILITIES								X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT STRONG SUPPORT								X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X	
WRITES EFFECTIVELY								X	
SECURITY CONSCIOUS								X	
THINKS CLEARLY								X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X	
OTHER (Specify):									

SEE SECTION "E" ON REVERSE SIDE

SECRET
(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

_____ is a steady, conscientious worker, and has consistently displayed initiative and thoroughness in his research assignments. His main weakness is in organizing and presenting the results of his work. This weakness is also apparent in his oral presentation of argumentation. _____ frequently "talks around a point" instead of "hitting the point". This weakness has influenced the rating given under Section D - "thinks clearly", and limits his effectiveness as a supervisor. It is hoped that _____ will overcome this weakness in his forthcoming assignment overseas.

OFFICE OF PERSONNEL
AUG 19 4 56 PM '59
MAIL ROOM

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

42

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Departed on PCS overseas.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

OFFICIAL TITLE OF SUPERVISOR

AND SIGNATURE

13 August 1959

Chief, FM/EA

3. BY REVIEWING OFFICIAL

☒ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

☐ I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

13 August 1959

Chief, St/PM

SECRET

S-E-C-R-E-T

REPORT OF TRAINING

Operations Familiarization Course No. 17

I. IDENTIFYING INFORMATION

Name: Sex: Male
Date of Birth: Grade or Rank: GS-11
EOD Date: 15 June 1953 Office: OAR
Dates of Course: 6 Apr - 15 May 59 No. of Students: 25
Projected Assignment or Present Position:
(from Request for Internal Training)

II. DESCRIPTION OF COURSE

The Operations Familiarization Course is a six-week course designed primarily for Clandestine Services non-case officer personnel and for non-Clandestine Services officers whose responsibilities in support of operations require adequate familiarization with case officer functions and with the programs and operations of the Clandestine Services.

III. REPORT OF STUDENT ACHIEVEMENT

To satisfactorily complete the Operations Familiarization Course the student must demonstrate in a series of seminars and in a limited number of written assignments that he has acquired an adequate understanding of the fundamentals of clandestine operations. Testing mechanisms are minimal and do not permit an extensive evaluation of individual performance.

satisfactorily completed Operations Familiarization Course No. 17.

FOR THE DIRECTOR OF TRAINING:

Chief Instructor, OFC

Chief, Field Training

S-E-C-R-E-T

(When filled in)

COURSE EVALUATION

SPANISH BASIC COURSE (REPEATED) - WINTER II (PART-TIME)

SECTION I: IDENTIFYING INFORMATION

NAME [REDACTED]		SEX Male	DATES OF COURSE 5 Jan - 13 March 1959	NO. OF STUDENTS 3
DATE OF BIRTH [REDACTED]	BOB DATE 15 June 1955	GRADE OR RANK OS-11	OFFICE OSB	
PROPOSED ASSIGNMENT ON PRESENT LOCATION Analytic position in ST/FM				

SECTION II: SPECIFIC CHARACTERISTICS OF THE COURSE

This course lasts 10 weeks. The classes are held 2 hours per day, 5 days a week. Students are required to do a minimum of 10 hours per week of drill in the language laboratory outside of class hours. The instructor is able to meet at any time by appointment with each student individually. Students are given at least two major tests and a number of ten-minute tests during the progress of the course.

SECTION III: OBJECTIVES

The general aim of this course is to provide a thorough grounding for the student who has previously had either a reading course in the language or an insufficient introduction to the language. It serves as a basis for further advancement either by independent learning in the area or by further study.

The specific objectives are:

- Ability to produce and distinguish all the sounds of the language.
- Ability to use adequately a stock of correct Spanish sentences and expressions.
- Ability to analyze sentences and expressions into their components.
- Ability to comprehend speech-speed spoken Spanish in a wide variety of non-technical situations.
- Ability to read and write informal Spanish using a limited number of vocabulary and structural items.

SECTION IV: EVALUATION RATING

The following is an explanation of the five terms of evaluation employed below:

- The student failed to satisfy minimum requirements, and his grasp of the material is too inadequate to be functional.
- The student satisfied only the minimum requirements of the objectives. His grasp is barely functional.

3-E-C-R-R-T
(When filled in)

SECRET
(When Filled In)

3. The student met the objectives in a creditable manner, revealing a good grasp of essentials.
4. The student showed a high degree of competence in meeting the objectives.
5. The student demonstrated exceptional ability or proficiency in meeting the objectives. The accomplishment was one attained by a very small number of students.

SECTION V: ACHIEVEMENT RATINGS

The number in each cell represents the number of students receiving that rating in terms of the above objectives. The asterisk (*) represents the rating this student achieved.

Course Objectives	Rating 1	Rating 2	Rating 3	Rating 4	Rating 5
Objective A			2 *	1	
Objective B			2 *	1	
Objective C			2 *	1	
Objective D			2 *	1	
Objective E			2 *	1	

This class as a whole is rated as:

Above average

Arceuthobium

Slower than average

SECTION VI: COMMENTS

[redacted] performed fairly unevenly in this course. As a rule his preparations were more thorough during the first five weeks of the course.

FOR THE DIRECTOR OF TRAINING

Signature of Instructor _____

100-44261-100
JAN 25 1964

SECTION I: IDENTIFYING FACTS			
NAME	SEX	DATE OF BIRTH	NO. OF SPECIMENS
[REDACTED]	Male	13 Oct 58-19 Dec 58	6
DATE OF BIRTH	FOR CARD	TEST	TYPE
[REDACTED]	15 June 1955	03-11	008
PROJECTED ASSIGNMENT OR PRESENT POSITION			
Analyst			

SECTION II: SPECIFIC CHARACTERISTICS OF THE COURSE

This course lasts 10 weeks. The classes are held 2 hours per day, 5 days a week. Students are required to do a minimum of 10 hours per week of drill in the language laboratory outside of class hours. The instructor is able to meet at any time by appointment with each student individually. Students are given at least two major tests and a number of assignments during the period of the course.

SECTION III: OBJECTIVES

The general aim of this course is to provide a thorough grounding for the student who has previously had a very basic course in the language or an insufficient introduction to the language. It serves as a basis for further advancement either by independent learning in the area or by further study.

The specific objectives are:

- Objective A. Ability to produce and distinguish all the sounds of the language.
- Objective B. Ability to use intelligibly a stock of correct Spanish sentences and expressions.
- Objective C. Ability to analyze sentences and phrases into their components.
- Objective D. Ability to understand conversational spoken Spanish in a wide variety of conversational situations.
- Objective E. Ability to read and understand a limited number of elementary and attractive texts.

SECTION IV: EVALUATION SYSTEM

Continued
When filled in

CLASSROOM EVALUATION REPORT

The following is an explanation of the five terms of evaluation employed below:

- Rating 1. The student failed to satisfy minimum requirements, and his grasp of the material is too inadequate to be functional.
- Rating 2. The student satisfied only the minimum requirements of the objectives. His grasp is barely functional.
- Rating 3. The student met the objectives in a creditable manner, revealing a good grasp of essentials.
- Rating 4. The student showed a high degree of competence in meeting the objectives.
- Rating 5. The student demonstrated exceptional ability or proficiency in meeting the objectives. His accomplishment was one attained by a very small number of students.

SECTION VI: ACHIEVEMENT RATINGS

The number in each cell represents the number of students receiving that Rating in terms of the above objectives. The asterisk (*) represents the Rating this student achieved.

Course Objectives	Rating 1	Rating 2	Rating 3	Rating 4	Rating 5
Objective A		1	2	2*	1
Objective B			3*	3	
Objective C			4*	2	
Objective D			3*	3	
Objective E			3	3*	

This class as a whole is rated as:

Above average _____ Average X _____ Below average _____

SECTION VII: COMMENTS

Since reading skills are stressed during the latter part of the 50-week course series, the rating for Objective E is based on a limited amount of information.

FOR THE DIRECTOR OF TRAINING:

/s/
Signature of Unit Instructor

DATE: _____
(When filled in)

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SER M	4. SERVICE DESIGNATION IR
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT OPD		6. OFFICIAL POSITION TITLE Identification Specialist	
7. GRADE 11	8. DATE REPORT DUE IN OP 29 March 58	9. PERIOD COVERED BY THIS REPORT (Exclusive dates) 15 March 57 - 15 March 58	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT - SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT - EMPLOYEE	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ WAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.
Individual on TDY Overseas

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" in CI OR O, A WARNING LETTER HAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE

2 April 1958

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

D. SUPERVISOR'S OFFICIAL TITLE

Branch Chief/EA

2. FOR THE REVIEWING OFFICER: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE
MA 10 APR 1958
Posted For Control
Reviewed by PCD 4/14/58

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 2 Apr 58	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, SE/ENR
--------------------------	--	--

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

Performance

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during the rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing similar duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>DESCRIPTIVE RATING NUMBER</p> <table border="0"> <tr> <td>1 - INCOMPLETE IN THE PERFORMANCE OF THIS DUTY</td> <td>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</td> </tr> <tr> <td>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</td> <td>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</td> </tr> <tr> <td>3 - PERFORMS THIS DUTY ACCEPTABLY</td> <td></td> </tr> <tr> <td>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</td> <td></td> </tr> <tr> <td>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</td> <td></td> </tr> </table>				1 - INCOMPLETE IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY	3 - PERFORMS THIS DUTY ACCEPTABLY		4 - PERFORMS THIS DUTY IN A COMPETENT MANNER		5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB															
1 - INCOMPLETE IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS																										
2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY																										
3 - PERFORMS THIS DUTY ACCEPTABLY																											
4 - PERFORMS THIS DUTY IN A COMPETENT MANNER																											
5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB																											
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 2	RATING NUMBER																								
Organizes raw data into analytic file	5	Directs field exploitation	4																								
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Derives significant intelligence from data	5	Supervises junior analysts	4																								
SPECIFIC DUTY NO. 5	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Prepares reports on conclusions	3																										
<p>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</p> <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>[] is a steady, conscientious, cooperative worker. He is very thorough in his approach to research assignments and has displayed initiative in those assignments. He does not require close supervision. His main weakness is in organizing and presenting the results of his research.</p>																											
<p>SECTION D: SUITABILITY FOR CURRENT JOB IN ORGANIZATION</p> <p>DIRECTIONS: Take into account here everything you know about the individual... productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <table border="0"> <tr> <td>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</td> </tr> <tr> <td>2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</td> </tr> <tr> <td>3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</td> </tr> <tr> <td>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</td> </tr> <tr> <td>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</td> </tr> <tr> <td>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</td> </tr> <tr> <td>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</td> </tr> </table> <p>DESCRIPTIVE RATING NUMBER</p> <p>4</p>				1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED	2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW	3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION	4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION	5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS	6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION	7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION																	
1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED																											
2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW																											
3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION																											
4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION																											
5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS																											
6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION																											
7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION																											
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY.</p>																											

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials, concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision for AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CI no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E: GENERAL					
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION		
		M	IR		
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT			6. OFFICIAL POSITION TITLE		
CRR			Identification Specialist		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
11	29 March 58	15 March 57 - 15 March 58			
10. TYPE OF REPORT (Check one)		11. REASSIGNMENT SUPERVISOR		12. SPECIAL (Specify)	
<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE			

SECTION F: CERTIFICATION		
1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
8 April 1958		Branch Chief/EA
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
8 Apr 58		Chief, St/EN/RR

SECTION G: ESTIMATE OF POTENTIAL	
1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES	
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.	
4	<p>1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED</p> <p>2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED</p> <p>3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES</p> <p>4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES</p> <p>5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBILITIES OUTSIDE OF HIS PRESENT TRAINING</p> <p>6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL</p> <p>7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES</p>
RATING NUMBER	DATE Reviewed by PUC

2. SUPERVISORY POTENTIAL	
DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUIABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.	

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE AT LEAST SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN ASSISTANT SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A JUNIOR SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DISCUSSIVE SITUATION		
2		A GROUP USING THE BASIC JOB (such as clerks, stenographers, technicians or professional specialists of various kinds) whose contact with immediate superiors is frequent (First line supervisors)		
	2	A GROUP OF SUPERVISORS WHO USE THE BASIC JOB (Second line supervisors)		
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHO IS RESPONSIBLE FOR WORK PLANS, ORGANIZATION AND POLICY (Discursive level)		
	2	WHEN CONTACT WITH IMMEDIATE SUPERIORS IS NOT FREQUENT		
	3	WHEN IMMEDIATE SUPERIORS ARE OFFICE AND NEED FREQUENT COORDINATION		
	2	WHEN IMMEDIATE SUPERIORS INCLUDE MEMBERS OF THE STAFF OR ARE		
		Other (Specify)		

SECRET

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE NAMED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
30 APR-9-4 31 PM '58

4. COMMENTS CONCERNING POTENTIAL
His knowledge of basic social science analytic processes and maturity of judgment give him potential of a reasonably broad scope. MAIL ROOMNESS in organizing and presenting his findings will be a limiting factor in the immediate future.

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
Writing courses and additional on-the-job training, to include overseas TDY on operational assignments.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

4 - HAVE NOT OBSERVED THIS; HENCE, CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. TENDS TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITY	3	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. KEEPS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW RESEARCH AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
3	6. SHOWS TENDENCY TO SEE DISTANCE	4	16. DOES HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS CREATIVE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HAS CRITICISM TO CONSTRUCTIVE
4	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES OTHERS' OPERATION OF HIS OFFICE
4	10. CAN Cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	4	30. DOES NOT RESIGNAL STRESS AND CONTINUOUS SUPERVISORY

SECRET

TSS/PB-TRAINING DIVISION EVALUATION

DARKROOM 9

BASIC PHOTOGRAPHY No. 1

NAME DIV CR3 BR EA DATES TRAINED: from 23 June to 17 July '77

This course is primarily designed to develop the following skills: Use of 35 mm cameras with accessories, document copy, processing and printing.

	None	Unsat	Fair	Good	Excellent	Superior
I. Manipulation of camera.						
a. Leica				X		
b. Retina II C	X					
c. Recordak				X		
II. Processing and printing.						
a. Film loading				X		
b. Film processing				X		
c. Enlarging				X		
d. Reflex and contact printing					X	
III. Use of accessory equipment.						
a. Exposure meter				X		
b. Filters	X					
c. Telephoto and wide angle lenses				X		
IV. Document copy and small objects.						
a. Available light	X					
b. Accessory illumination				X		
c. BOOWU, portra lens, focus slide				X		
V. Ground photography.						
a. Coverage						
b. Report	X					
VI. Casing.						
a. Coverage						
b. Report						
VII. Surveillance.						
a. Coverage						
b. Report						
VIII. Special problems.						
a. Coverage						
b. Report						
General quality of prints				X		
Choice of subject matter				X		
Quality of darkroom work (Cleanliness, etc)				X		
Attitude toward subject matter				X		
Cooperation					X	

REMARKS

 met the course objectives and completed all of the course assignments for the two weeks he attended with average results.

Encountering some difficulty at the outset, was overcome many of his problems to be checked out in one only course equipment, but other equipment as well. He also differed to complete additional assignments on his own time.

It is suggested he continue his practice and association with photography in order to maintain and improve present proficiency.

APPROVED
C/TSS/ND

Instructor

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8 of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX M	4. SERVICE DESIGNATION IR
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT ORR/Techniques & Methods/Analysis & Reports		6. OFFICIAL POSITION/TITLE Identification Specialist	
7. GRADE GS-9	8. DATE REPORT DUE IN OF 29 March 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 March 1956 - 15 March 1957	
10. TYPE OF REPORT (Check one)	INITIAL	PERMANENT EMPLOYEE	SPECIAL (Specify)
	ANNUAL	PERMANENT EMPLOYEE	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "1" IN CY OR D, A BARRING LET-TER HAS BEEN TO HIM OR A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL UNDERSTANDS HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE 28 March 57	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	D. SUPERVISOR'S OFFICIAL TITLE Acting Branch Chief
-----------------------------	--	---

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Posted For	22 APR 1957
Reviewed by	54

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 28 March 57	B. TYPED OR PRINTED NAME OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, D/TAR
-----------------------------	--	---

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES:

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5	1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

Performance

(4)

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
- For some jobs, duties may be broken down even further. If supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATING NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	3 - PERFORMS THIS DUTY ACCEPTABLY	4 - PERFORMS THIS DUTY IN A COMPETENT MANNER	5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
SPECIFIC DUTY NO. 1							
Organizes raw data into analytic file.							
RATING NUMBER			6				
SPECIFIC DUTY NO. 2							
Derives significant intelligence from data.							
RATING NUMBER			5				
SPECIFIC DUTY NO. 3							
Drafts reports on conclusions.							
RATING NUMBER			4				
SPECIFIC DUTY NO. 4							
Devises codes for mechanical processing of raw data.							
RATING NUMBER						5	
SPECIFIC DUTY NO. 5							
Participates in field exploitation							
RATING NUMBER							5
SPECIFIC DUTY NO. 6							
RATING NUMBER							

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses; particularly those which affect development on present job.

_____ is an energetic, competent worker. He has demonstrated the ability to handle research problems and to present his findings in writing. _____ organizes his work so that he requires a minimum of supervision. He has worked as an excellent team member and his suggestions have been constructive.

SECTION C. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual... productivity; conduct in the job; pertinent personal characteristics or habits; special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.

- DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
- OF DOUBTFUL SUITABILITY - SHOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
- A BARELY ACCEPTABLE EMPLOYEE - BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
- OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
- A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
- AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
- EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY.

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE REVIEWER: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the IS no later than 90 days after the due date indicated in item 8 of Section "F" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SER H	4. SERVICE DESIGNATION IR
5. OFFICE/SECTION/BRANCH OF ASSIGNMENT OPR/Techniques & Methods/Analysis & Reports		6. OFFICIAL POSITION TITLE Ident. Specialist	
7. GRADE OS-9	8. DATE REPORT DUE IN OF 25 March 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 March 1956 - 15 March 1957	
10. TYPE OF REPORT (Check one)	INITIAL	PERIODIC SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> PERIODIC	<input type="checkbox"/> INITIAL	<input type="checkbox"/> PERIODIC SUPERVISOR	<input type="checkbox"/> SPECIAL (Specify)

SECTION F.

CERTIFICATION

1. FOR THE DATED 28 March 57, I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE Acting Branch Chief
28 March 57		
2. FOR THE DATED 28 March 57, I HAVE REVIEWED THE REPORT AND NOTED ANY DIFFERENCES, IF ANY, IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING	C. OFFICIAL TITLE OF REVIEWING OFFICIAL CHIEF JLT
28 March 57		

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

1 - ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	DATE
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	241957
3 - MAKING PROGRESS, BUT NEEDS MORE EXPERIENCE BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES	
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES	
5 - WILL PROBABLY ADJUST HIMSELF TO MORE RESPONSIBILITIES WITHOUT FURTHER TRAINING	
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL	
7 - AN EXPERIENTIAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES	

RATING NUMBER: 6

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No. If your answer is YES, indicate your opinion as to the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by checking the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DISCREPANCY RATING NUMBER	ACTUAL	POTENTIAL	DISCREPANCY RATING NUMBER	DISCREPANCY RATING NUMBER
1	2	2	1	2
2	3	3	2	3
3	4	4	3	4
4	5	5	4	5
5	6	6	5	6
6	7	7	6	7
7	8	8	7	8
8	9	9	8	9
9	10	10	9	10
10	11	11	10	11
11	12	12	11	12
12	13	13	12	13
13	14	14	13	14
14	15	15	14	15
15	16	16	15	16
16	17	17	16	17
17	18	18	17	18
18	19	19	18	19
19	20	20	19	20
20	21	21	20	21
21	22	22	21	22
22	23	23	22	23
23	24	24	23	24
24	25	25	24	25
25	26	26	25	26
26	27	27	26	27
27	28	28	27	28
28	29	29	28	29
29	30	30	29	30
30	31	31	30	31
31	32	32	31	32
32	33	33	32	33
33	34	34	33	34
34	35	35	34	35
35	36	36	35	36
36	37	37	36	37
37	38	38	37	38
38	39	39	38	39
39	40	40	39	40
40	41	41	40	41
41	42	42	41	42
42	43	43	42	43
43	44	44	43	44
44	45	45	44	45
45	46	46	45	46
46	47	47	46	47
47	48	48	47	48
48	49	49	48	49
49	50	50	49	50
50	51	51	50	51
51	52	52	51	52
52	53	53	52	53
53	54	54	53	54
54	55	55	54	55
55	56	56	55	56
56	57	57	56	57
57	58	58	57	58
58	59	59	58	59
59	60	60	59	60
60	61	61	60	61
61	62	62	61	62
62	63	63	62	63
63	64	64	63	64
64	65	65	64	65
65	66	66	65	66
66	67	67	66	67
67	68	68	67	68
68	69	69	68	69
69	70	70	69	70
70	71	71	70	71
71	72	72	71	72
72	73	73	72	73
73	74	74	73	74
74	75	75	74	75
75	76	76	75	76
76	77	77	76	77
77	78	78	77	78
78	79	79	78	79
79	80	80	79	80
80	81	81	80	81
81	82	82	81	82
82	83	83	82	83
83	84	84	83	84
84	85	85	84	85
85	86	86	85	86
86	87	87	86	87
87	88	88	87	88
88	89	89	88	89
89	90	90	89	90
90	91	91	90	91
91	92	92	91	92
92	93	93	92	93
93	94	94	93	94
94	95	95	94	95
95	96	96	95	96
96	97	97	96	97
97	98	98	97	98
98	99	99	98	99
99	100	100	99	100

SECRET
(When Filled In)

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
 18

2. COMMENTS CONCERNING POTENTIAL
 A fine junior officer who will certainly continue progress upward in [] analytic competence and responsibility. to have the personal flexibility and breadth to develop into a competent senior intelligence officer of reasonably broad scope.

APR 15 4:07 PM '57
MAIL ROOM

SECTION II: FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

[] development program will continue to be in increasing his capabilities in [] analysis and exploitation. A training course in supervision will be considered.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I: DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in each degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE, CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN SIGNIFYING WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	2	24. MOVES WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	2	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
	10. CAN Cope WITH EMERGENCY	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS		30. DOES NOT REQUIRE A PRAISE AND CONTINUOUS SUPERVISION

SECRET

21
SECRET

(When Filled In)

FITNESS REPORT (Part D) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.
FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any section. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in Item B. of Section A. below.

SECTION A.

GENERAL

1. NAME (Last) (Middle)	2. DATE OF BIRTH	3. SEX M	4. SERVICE DESIGNATION SD/IR
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT OPR, Techniques & Methods Div., Analysis & Reports Br.			
6. GRADE GS-7	7. DATE REPORT DUE IN OF 6 April 1956	8. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 June 1955 - 15 March 1956	9. OFFICIAL POSITION TITLE Identification Specialist
10. TYPE OF REPORT (Check one) <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify)			

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN C1 OR D, A WARNING LETTER HAS BEEN SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

2. THIS DATE
9 April 1956

3. TYPED OR PRINTED NAME AND SIGNATURE
[Signature]

SUPERVISOR'S OFFICIAL TITLE
SFC, T/AR

2. FOR THE REVIEWING OFFICIAL

INFORMATION WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

No difference of opinion. Concur in evaluation of [] as one of the better young men I've seen.

BY
Posted Pos. Control 7-P.
Reviewed by PUD 2/8-25
DATE
20 APR 1956

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE
9 April 56

B. TYPED OR PRINTED NAME AND SIGNATURE
[Signature]

C. OFFICIAL TITLE OF REVIEWING OFFICIAL
CPT, D/P

SECTION C.

1. RATING ON GENERAL PERFORMANCE OF DUTIES

5

1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

1. Employment should be continued beyond the probationary period.
2. [] performance on the job was substantially superior to indications from the BUC evaluation.

SECRET

Performance

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Rate performance on each specific duty considering ONLY effectiveness in performance of this SPECIFIC duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with other individuals performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate the different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONTACTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES BUDGETS
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPIST	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
- For some jobs, duties may be broken down even further if supervisor considers it advisable: e.g., combined key and phone operation, in the case of a radio operator.

- | | | |
|---------------------------------|---|--|
| DESCRIPTIVE
RATING
NUMBER | 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS |
| | 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY | 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
| | 3 - PERFORMS THIS DUTY ACCEPTABLY | |
| | 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER | |
| | 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | |

SPECIFIC DUTY NO. 1 Organize raw data into analytic file	RATING NUMBER 6	SPECIFIC DUTY NO. 4 Participate in field exploitation	RATING NUMBER 6
SPECIFIC DUTY NO. 2 Derive significant intelligence from data	RATING NUMBER 6	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 Draft reports on conclusions	RATING NUMBER 5	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS:

Stress strengths and weaknesses, particularly those which affect development on present job.

[] has been an energetic and steady worker, quick to grasp instructions, and able to proceed without close supervision. He has made specific contributions toward simpler and more precise analytic methods, and has consistently worked as an excellent team member.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual... productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.

- DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
- OF DOUBTFUL SUITABILITY - WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
- A BARELY ACCEPTABLE EMPLOYEE - STAYS AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
- OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
- A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
- AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
- EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ NO ☒ YES

EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

FITNESS REPORT- (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision NOT AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CE no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	SD/IR
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
OR, Techniques and Methods Div., Analysis & Reports Br., Identification Specialist			
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-7	6 April 1956	15 June 1955 - 15 March 1956	
10. TYPE OF REPORT (Check one)	11. SPECIAL (Specify)		
<input checked="" type="checkbox"/> INITIAL			
<input type="checkbox"/> ANNUAL			
<input type="checkbox"/> REASSIGNMENT-SUPERVISOR			
<input type="checkbox"/> REASSIGNMENT-EMPLOYEE			

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
9 April 1956		CHIEF, T/AR
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND HAVE EXPRESSED MY OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
9 Apr 56		CHIEF, D/T

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	
2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	
3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES	
4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES	
5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING	
6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL	
7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES	

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	1. MADE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	2. BELIEVE INDIVIDUAL WOULD BE A LESS SUPERVISOR IN THIS KIND OF SITUATION	3. BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	4. BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisors)		
	2	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	0	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION, AND POLICY (Executive level)		
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
	2	WHEN IMMEDIATE SUBORDINATE ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
	2	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

SECRET

(When Filled In)

1. INDICATE THE APPROXIMATE NUMBER IN MONTHS THE RATED SUBJECT HAS BEEN UNDER YOUR SUPERVISION					
SIX	OFFICE OF TELECOMMUNICATIONS				
4. COMMENTS CONCERNING POTENTIAL					
<p>A fine junior officer who will certainly progress rapidly upward in [redacted] analytic competence and responsibility. He apparently has the personal flexibility and breadth to develop into a competent officer of reasonably broad scope.</p> <p style="text-align: right;">AR 19 12 45 PM '56</p>					
SECTION II. FUTURE PLANS					
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL					
<p>For the immediate future, [redacted] development program should be in terms of increasing his capabilities in specific terms of [redacted] and analysis.</p>					
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENT					
SECTION I. DESCRIPTION OF INDIVIDUAL					
<p>DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.</p> <p>X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL</p> <p>CATEGORY NUMBER</p> <p>1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE</p> <p>2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE</p> <p>3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE</p> <p>4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE</p> <p>5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE</p>					
CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFICIENT IN DECISIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS OR GET GOING WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN ESTABLISHED
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. KNOWS HIS ERRORS	X	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND SKILL	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
4	6. KNOWS WHEN TO ASK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRESS OR STRAIN	4	26. IS SECURE IN KNOWLEDGE
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MINUS FOR TALK	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. DOES THINGS DONE	4	19. THINKS CLEARLY	5	29. FACILITATES SWOOSH OPERATION OF HIS OFFICE
X	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	4	30. DOES NOT REQUIRE STRESS AND CONTINUOUS SUPERVISION

SECRET

SECRET

TRAINING EVALUATION

INTEL. PRINCIPLES AND METHODS NO. 8

SECTION I: IDENTIFYING INFORMATION			
NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
	M	26 Sept. - 21 Oct.	11
DATE OF BIRTH	END DATE	GRADE OR RANK	SECTION
	15 June 1955	OS-7	OSR

PROJECTED ASSIGNMENT OR FUTURE POSITION
Identification Specialist

- SECTION II: OBJECTIVES OF THE COURSE
1. To introduce students to the skills and methods involved in the processing of intelligence materials;
 2. To provide practice in the oral and written presentation of intelligence for a variety of purposes.

SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE

Intelligence Principles and Methods is a four weeks (100 hours) extension of Basic Orientation Course for personnel who are or will be engaged in the production of intelligence. Emphasis is on "learning by doing", through the medium of a series of integrated written exercises which require processing of actual intelligence documents. Exercise is also gained in the oral presentation of intelligence through a series of briefings before the class. Each student is assigned a special research problem for which approximately 40 hours are allotted in the course schedule. The results are presented to fellow-students and instructors in an oral briefing at the close of the course. The student also prepares an annotated bibliography, and writes a critical review of one of his chief sources.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

Written exercises are graded independently by at least two members of the instructional staff on the basis of how well the student has fulfilled the requirements of selectivity, organization, accuracy, to original, brevity and clarity of style. Grades for each type of written exercise are defined in Section V. Oral briefings are evaluated by both instructors and fellow students through the use of written critique sheets and oral observations following each presentation. A composite grade is given for the oral briefings. In the evaluation of the research problem the grade awarded reflects intelligence focus, exploitation of sources, and general effectiveness of written and oral presentation. The grades are defined as follows:

SUPERIOR: The student demonstrated outstanding ability in processing intelligence; met all objectives; is fully conversant with the thorough knowledge of the material presented; and is able to apply the same demonstrated both in the oral and written presentation of intelligence.

EXCELLENT: The student showed unusual competence, skill or ability in meeting this objective or goal; he demonstrated a thorough grasp of the presented material, or, if skills are involved, he demonstrated that he can perform in an extremely effective manner in this area.

FOOR: Although the student may have met some of the standards set for minimum achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be of doubtful competence.

SECTION V: REPORT OF STUDENT ACHIEVEMENT

SUBJECT	FAIL	POOR	SAT	EXC	SUP
1. Exercise - Interview Reporting	0	0	6*	7	1
2. Exercise - Brief Daily Intell. Item	0	0	7	6*	1
3. Exercise - Periodical Intell. Item	0	0	5*	9	0
4. Critical Book Review	0	0	4	7*	3
5. Research Problem	0	0	6*	7	1
6. Skill in Oral Briefing	0	0	6*	8	0

In terms of all factors observed during the course and taking into account this student's experience in the Agency, grade, and general area of work, an "X" in one of the boxes shows the judgment of the instructional staff of his performance.

Fail	Poor	Minus	Satisfactory	Plus	Excellent	Superior
<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

FOR THE DIRECTOR OF TRAINING:

Chief Instructor

SECTION VII: INSTRUCTORS' COMMENTS

[] performance in the course was no more than average, but he applied himself to the work and was interested in getting something out of the instruction. [] took "Economic Relations between Afghanistan and the USSR" as the topic for his research project and did considerable work on the subject, in spite of a dearth of material. His critical review was workmanlike and showed that he had put a definite effort into preparing it.

This evaluation, shown by an "X" in one of the boxes, takes into account this training record, the student's age, grade, Agency experience, and projected assignment. It is included for the purpose of giving supervisors an estimate of the implications of the training evaluation report for the student's assignment and career potential.

0 000 000000000000 000 0

Training Officer

SECRET

WJ7-1

READING ANALYSIS PROGRAM

8

OBJECTIVE ORIGIN

1. To determine employee's proficiency level in scanning, extensive and intensive reading tasks.
2. To determine employee's degree of reading versatility. Versatility is defined as the ability to apply the several reading skills appropriately to various reading situations.
3. To ascertain the probable gain which would accrue from further training in reading skills.
4. To inform each employee concerning his relative reading proficiency in scanning, extensive and intensive reading and his versatility.

TEST DESCRIPTION

READING COMPREHENSION TEST: Measures speed and accuracy of basic comprehension skills. Complete and objective understanding, analysis, and interpretation are required in this test.

EXTENSIVE READING TEST: Measures the degree of proficiency in informational, or general reading.

INTENSIVE READING TEST: Measures reading proficiency in acquiring basic knowledge of new subjects.

SCANNING TEST: Measures proficiency in the organization and location of specific information, main ideas, and questions.

ANALYSIS OF READING PERFORMANCE

	Poor	Fair	Ext.	Exo.	Sup.
1. Basic Comprehension Skills			X		
2. Extensive Techniques			X		
3. Intensive Techniques		X			
4. Scanning Techniques:					
Specific Information			X		
Main Ideas			X		
Questions			X	X	
Organization			X		
5. Versatility			X		

COMMENTS AND RECOMMENDATIONS:

[] scans for specifics quickly and accurately; he scans for main ideas satisfactorily, but could improve his use of that technique with practice. Poorer comprehension in intensive reading could be caused by lack of concentration or failure to organize information while reading. Extensive reading could be improved by adjusting rate to read selectively for pertinent information. The Reading Improvement Course would be of benefit in developing use of more diversified skills.

M. J. H.

FOR THE DIRECTOR OF TRAINING

Chief Instructor

SECRET

SECRET

TRAINING EVALUATION -- BASIC ORIENTATION					COURSE NO. 21	
SECTION I IDENTIFYING INFORMATION						
NAME		SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF COURSE 6 - 23 September 1955		NO. OF STUDENTS 126
DATE OF BIRTH		EOD DATE June 1955		GRADE OR RANK GS-7		OFFICE AFR
PROJECTED ASSIGNMENT OR PRESENT POSITION Identification Specialist						
SECTION II CHARACTERISTICS OF THE COURSE						
Material in this course is presented primarily by lecture and exhibit; several seminars and discussions are also held. The rating on Introduction to Intelligence is determined by the results of one multiple choice test, based on lecture material; the rating on Communism and the USSR is determined by one multiple choice test covering the lecture and readings.						
SECTION III OBJECTIVES						
A. The Basic Orientation Course is designed to provide the student with information in the following areas:						
1. <u>Introduction to Intelligence</u>						
a. Organization for national security, with emphasis on the intelligence community and the organization and mission of CIA as it fits into the whole national security effort.						
b. The principles and methods of intelligence, emphasizing the substantive components of CIA, considering the types of information, and the collecting, processing, and disseminating functions.						
c. An introduction to clandestine activity, with emphasis on the functions of the clandestine services.						
2. <u>Communism and the USSR</u>						
This deals with Marxist theory, the history of Socialism and Communism, Communist activities outside the USSR, history and geography of Russia, political structure of the USSR, Soviet foreign policy, and potentialities and vulnerabilities of the USSR.						
B. Throughout the three weeks of the course discussions and conferences deal with the American Thesis.						
SECTION IV STUDENT ACHIEVEMENT RATINGS						
The numbers placed in the columns below show how many students received each rating. An asterisk (*) shows the rating this student received.						
SUBJECT	HOURS	RATING				
		FAIL	POOR	SATISFACTORY	EXCELLENT	SUPERIOR
INTRODUCTION TO INTELLIGENCE	64	4	9	30	45 *	32
COMMUNISM AND THE USSR	56	2	14	40*	37	29
SECTION V COMMENTS						
INDICATE ANY STRONG AND WEAK POINTS OF THE STUDENT, OR ANYTHING THAT MAY HAVE INFLUENCED HIS PERFORMANCE IN THE COURSE						
CONTINUE COMMENTS ON REVERSE SIDE <input type="checkbox"/> OVER						
FOR THE DIRECTOR OF TRAINING:				SIGNATURE OF OFFICE INSTRUCTOR		

SECRET

COVER CONTROL OF RETIREMENT PROCESSING										FILE	
TO: Retirement Operations Branch Office of Personnel										DATE	
RETIREE					CATEGORY OF EMPLOYMENT						
On the basis of a review of the records the following action is to be taken on processing retirement documentation for the person named above.											
TYPE RETIREMENT			CIVIL SERVICE			CIARDS			DATE		
COVER			OVERT ROUTINE			COVERT (OFFICIAL COVER) LOCK-UP			COVERT (NOC) SPECIAL		
CORRESPONDENCE			OVERT			COVERT			THRU CCS		
FINANCES											
ANNUITY PAYMENTS SHOULD BE						U.S. GOV'T. CHECK			OTHER (Payment instructions follow)		
TAX DOCUMENTATION SHOULD BE						CIA			CSC		
REQUEST TRANSFER OF FUNDS FROM CIVIL SERVICE COMMISSION						YES			NO		
INSURANCE											
FEGLI			OVERT			COVERT			MAINTAIN RECORDS INTERNALLY ONLY		
TYPE OF HOSPITALIZATION CARD:											
AUTHORIZATION TO CONVERT INSURANCE						YES			CONVERSION MUST BE APPROVED BY CCS		
RESERVE											
MEMBER OF CIVILIAN RESERVE						YES			NO		
						OVERT			COVERT		
REMARKS											
<p>CHIEF, COVER SUPPORT BRANCH COVER & COMMERCIAL STAFF</p> <p>THIS SECTION TO BE COMPLETED BY OFFICE OF SECURITY</p> <p>NO SECURITY OBJECTIONS TO ABOVE.</p> <p>OTHER INSTRUCTIONS AS FOLLOWS:</p>											
CHIEF, EMPLOYEE ACTIVITY BRANCH, OFFICE OF SECURITY											

FORM 3429 USE PREVIOUS EDITIONS

SECRET

E-2, IMPDET CL. BY: 007622

(4-0-13)

7 - OFF. PERS. FILE ROOM

DESIGNATION OF BENEFICIARY
FEDERAL EMPLOYEES GROUP LIFE
INSURANCE PROGRAM

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)

PLACE AN "X" IN THE APPROPRIATE BOX BELOW TO SHOW WHETHER YOU ARE:

☐ AN EMPLOYEE ☐ RETIRED OR AN APPLICANT FOR RETIREMENT ☐ RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS OR AN APPLICANT FOR SUCH BENEFITS

IF YOU ARE RETIRED OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS, GIVE YOUR "CSA," "CSL," "A," or "X" NUMBER

(CSA, CSL, A, or X number)

DEPARTMENT OR AGENCY IN WHICH PRESENTLY EMPLOYED (If retired, former department or agency):

(Department or agency) (Bureau) (Division) (Location—City, State, and ZIP Code)

I, the individual identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees Group Life Insurance Program heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of LIFE INSURANCE and ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as it is automatically canceled (see regulation "f" on reverse side of duplicate copy).

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES (SEE EXAMPLES OF DESIGNATIONS):

Type or print first name, middle initial, and last name of each beneficiary	Type or print address (including ZIP Code) of each beneficiary	Relationship	Share to be paid to each beneficiary
		Daughter	50%
		Son	50%

For each type of insurance (regular and optional): (1) I hereby direct, unless otherwise indicated above, that if more than one beneficiary is named, the share of any beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. (2) I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change this designation at any time without knowledge or consent of the beneficiary.

(Date of execution—month, day, year)

(Signature of insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

PRINT OR TYPE NAME AND ADDRESS (including ZIP Code) OF INSURED:

THIS SPACE RESERVED FOR RECEIVING AGENCY

JUL 9 10 00 AM '74

PERSONAL AFFAIRS

(Indicate date and by whom received)

SEE REVERSE SIDE OF DUPLICATE COPY FOR INSTRUCTIONS ON WHERE TO FILE THESE FORMS.
DO NOT FILE WITH THE OFFICE OF FEDERAL EMPLOYEES' GROUP LIFE INSURANCE.

IMPORTANT.—The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees Group Life Insurance Program you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any insurance payable under that program at your death.

EXAMPLES OF DESIGNATIONS

1. How To DESIGNATE ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
		Niece	All

2. How To DESIGNATE MORE THAN ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
		Aunt	25%
		Nephew	25%
		Mother	50%

3. How To DESIGNATE A CONTINGENT BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
		Father	All
		Sister	All

4. How To DESIGNATE DIFFERENT BENEFICIARIES FOR REGULAR AND OPTIONAL INSURANCE**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
		Son	All Regular Insurance
		Niece	All Optional Insurance

5. How To CANCEL A DESIGNATION OF BENEFICIARY AND EFFECT PAYMENT UNDER ORDER OF PRECEDENCE (see back of duplicate)

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

*Do not write name as M. E. Brown or as Mrs. John H. Brown. If you want to designate your estate as beneficiary, enter "My estate" in the beneficiary column.
 **Be sure that the shares to be paid to the beneficiaries add up to 100 percent.
 ***Be sure that the shares to be paid to the beneficiaries for that type of insurance are made in order of precedence (see back of duplicate).

U.S. GOVERNMENT PRINTING OFFICE: 1965 O-272-320

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1

FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate," carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2

FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (Last)	(First)	(Middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER*
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	

3

MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☐
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☒
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4

**SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

February 19, 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
FEB 21 10 32 AM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-1
JANUARY 1968
(For use only until April 16, 1968)
176-101

SECRET

13 December 1973

Letter of Commendation

TO:

1. I heroby commend you for your performance in a sensitive Station operation which was completed on 3 and 4 December 1973. Your role ensuring the security of the operation was of the utmost importance. To your credit you remained alert and carried out your duties professionally, despite the initial frustrations and the long hours involved. In doing so you have contributed to the successful accomplishment of a priority objective of our organization.

2. A copy of this letter will be placed in your official personnel file.

Chief of Station

SECRET

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HMB 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE		(Middle)		OFFICIAL PERSONNEL NUMBER	
1. MARITAL STATUS (Check one)					
<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
IF MARRIED, PLACE OF MARRIAGE				DATE OF MARRIAGE	
IF DIVORCED, PLACE OF DIVORCE DECREE				DATE OF DECREE	

MEMBERS OF FAMILY

NAME OF SPOUSE			ADDRESS (No Street, P.O. Box, etc.)			TELEPHONE NO.											
									NAME OF FATHER (or male guardian)			ADDRESS			TELEPHONE NO.		
									NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)			ADDRESS			TELEPHONE NO.		
									NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)			ADDRESS			TELEPHONE NO.		

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. *Brother*

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HMB 22-12). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
------	---------------	--------------

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

--	--	--

The persons named in items 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES		
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p>		
<p>INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS, AND THE NAMES IN WHICH THE ACCOUNTS ARE HELD.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		
<p>ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>		
<p>HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
<p>HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" give name(s) and address)</p>		
<p>HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes" who possess the power of attorney?)</p>		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY. (No Approval Required)		
<p>RESIDENCE WHEN EMPLOYED (Full Address)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p>PERMANENT PLACE OF RESIDENCE AS DEFINED IN NW 22-3 (Full Address)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See NW 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
<p>FULL ADDRESS</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p>DEPUTY DIRECTOR OR DESIGNEE</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p>DATE</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
	<p>DIRECTOR OF PERSONNEL (when applicable per NW 22-3)</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p>DATE</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p>SIGNED AT</p> <p><i>Wash DC</i></p>	<p>DATE</p> <p><i>4 Oct 73</i></p>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>

CONFIDENTIAL

SECRET

FICIA - ASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME [REDACTED]	DATE (from item 3.2) 14 Mar 73	NAME OF SUPERVISOR (item 3.2) [REDACTED]	DATE (from item 3.2) 14 Mar 73
DATE RECEIVED AT HEADQUARTERS: 14 March 1973	DISPATCH NUMBER: [REDACTED]	DATE RECEIVED BY CAREER SERVICE: [REDACTED]	

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH [REDACTED]	2. SERVICE DESIGN D	3. YOUR CURRENT POSITION, TITLE AND GRADE Ops Ofcr, GS-13	4. STATION ON BASE [REDACTED]	5. [REDACTED]
6a. DATE OF PCS ARRIVAL IN FIELD (2nd tour) 29 June 71	6b. DESIRED DATE OF DEPARTURE 1 July 1973	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ 1 August 1973	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE 1 September 1973	

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:
Wife; Dau - 13; Son - 12

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:
Wife cannot travel by air for medical reasons. Separate travel has been utilized in past assignments with principal and dependents going by air and wife following by ship.

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 340-8)

Referent on **[REDACTED]** matters 1 July 1972 to present.
Referent on **[REDACTED]** matters prior to 1 July 1972.

[REDACTED]

10. TRAINING DESIRED:
(INDICATE WHAT TRAINING YOU WOULD LIKE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS)

None

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

[Redacted]

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3, 4 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

☒ EXTEND TOUR 12 MONTHS AT CURRENT STATION TO 1 July 1974 (DATE)

☒ BE ASSIGNED TO DUTY FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE EA 2ND CHOICE WH 3RD CHOICE EVR

☒ BE ASSIGNED TO DUTY FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF PROGRAMATIC AREA OR SPECIALIZATION.
1ST CHOICE [Redacted]

☐ RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

[Redacted]

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

(CONT'D)

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

[Redacted] will be assigned to EA [Redacted] upon completion of his tour and home leave. He has been so advised.

DATE 24 Jul 73 TITLE C/EA/PERSONNEL SIGNATURE [Redacted]

FOR USE BY CAREER

14. APPROVED ASSIGNMENT

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATE: _____
CABLE NO. _____ DATE: _____

CAREER SERVICE REPRESENTATIVE: _____ DATE: _____
(Signature)

SECRET

PRQ [] - 14 March 1973

Operations Review course and training in writing.

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

**FILE
PUNCHED**

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
	(P)		

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION				
05	22	65					1			575

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION				

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify) <i>Per Division</i>	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
-----------------------------	----------------------

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DEC	DATE	SIGNATURE
C & L DIVISION, CYO	<i>6/2/71</i>	
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

(Print)

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION					40-42
			05	22	71	0 - CANCELLATION	1				515

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TOY (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION					40-42
						0 - CANCELLATION					

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER

DISPATCH

CABLE

DUTY STATUS OR TIME AND ATTENDANCE REPORT

OTHER (Specify)

DOCUMENT IDENTIF

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY

REPORT ASSOCIATED ON
CONTROL DOCUMENT

AC

DEC

C & S DIVISION, CTR.

DATE

SIGNAT

C & S DIVISION

THIS REPORT WILL BE FILED IN THE
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (Use Barcode only if 34)	DATE (from item 5-D)	NAME OF	DATE (from item 5-2)
	5 Oct 1970		5 Oct 1970
DATE RECEIVED BY HEADQUARTERS	DISPATCH NUMBER	DATE RECEIVED BY CAREER SERVICE	
16 October 1970		11 DEC 1970	

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5.
	D	Operations Officer GS-13		
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
22 May 1969	26 May 1971		27 July 1971	

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 340.8)

A.
B.
C.10. TRAINING DESIRED:
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS:

None

SECRET

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

NA

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

☒ EXTEND YOUR 12 MONTHS AT CURRENT STATION TO 30 May 1972 (DATE)

☐ BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____

☒ BE ASSIGNED TO _____ ATION
1ST CHOICE _____

☒ RETURN TO MY CURRENT STATION after home leave.

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

The Division approves subject's request for home ^{leave} and return ☐

DATE 10 Dec 70

TITLE CFE

SIGNATURE

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED: 10 Dec 70

CABLE NO. _____ DATED: _____

CAREER SERVICE REPRESENTATIVE: _____ DATE: 14 Dec 70

SECRET

S E C R E T

FIELD COMMENTS - continued

Subject has performed well in his assigned field thus far and I would expect to reap substantial benefits from his performance during his second tour based on the experience and knowledge he will have gained by the end of his first tour.

S E C R E T

CONFIDENTIAL

(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)

1.

IF WIDOWED, PLACE SPOUSE DIED

DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

2.

MEMBERS OF FAMILY

CAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

CURRENT RESIDENCE AND DEPENDENCY REPORT

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT

DATE

28 April 1969

CONFIDENTIAL

CONFIDENTIAL
(When filled in)

IMPORTANT

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CFB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.

[Redacted Signature Box]

Signature

18 Oct 1969
Date

[Redacted Signature Box]

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

SECRET

SSA/DAS 67-2037

CD 7-4476

16 OCT 1967

MEMORANDUM FOR: Deputy Director for Plans

SUBJECT : [REDACTED]
Fourth Security Violation

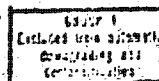
REFERENCE : HR 10-1a

1. This memorandum contains a recommendation for approval in paragraph 4.

2. Two officers of this Division have incurred their fourth security violation. Reference requires that I impose at least two weeks' leave without pay in each case unless your approval is obtained for a lesser penalty. I propose such a lesser penalty and request your concurrence.

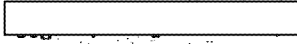
3. The officers concerned [REDACTED] are both dedicated Agency employees who have never, to the best of my knowledge, evidenced contempt for our security procedures nor displayed such gross negligence as to require strong remedial action. In neither case were any of the violations such as to indicate a compromise of information was probable; all were either open-safe or "exposed-classified-material" violations such as one-time typewriter ribbons, and none involved loss of documents, indiscreet talk or other more serious matters. Further, the majority of the violations occurred on occasions when the individuals concerned worked past the normal close of business and, while this is no excuse for carelessness, frequent overtime work does increase the possibility of a violation since the usual after-hours duty check is not operative. It seems to me, therefore, that the two weeks' leave without pay required by reference would be an excessively harsh penalty and not conducive to the enhancement of Agency security in general. I, therefore, propose the imposition of two days' leave without pay and a written reprimand for each officer. Copies of the proposed reprimand are attached.

SECRET



SECRET

4. It is recommended that the subjects be each issued a written reprimand and directed to take two days' leave without pay as the result of incurring their fourth security violation.


William E. Colby
Chief, Far East Division

Attachment
Proposed reprimands

* The recommendation contained
in paragraph 4 is APPROVED:

/s/ Cord Meyer, Jr.

A Deputy Director for Plans

16 NOV 1967

Date

* The recommendation contained in para. 4 is approved; except that 3 days LWOP will be charged instead of the 2 days proposed.

SECRET

[illegible]

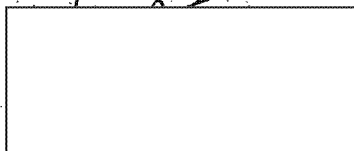
SECRET

SECRET

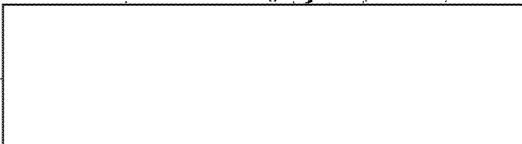
SECRET



UNITED STATES GOVERNMENT



ACCEPTED:



SECRET

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

C 515/3 80M

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (Do not include only if SA)	DATE (from item 5-1)	NAME OF SUPERVISOR (if any)	DATE (from item 5-2)
	7 Feb 66		3 Mar 66
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CARRIER SERVICE:	
11 Mar 66			

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
	D XX	GS-12 Ops Officer	Saigon	
6. DATE OF PCS ARRIVAL IN FIELD	7. REQUESTED DATE OF DEPARTURE	8. EXPECTED DATE OF FIRST CHECK-IN AT HQ	9. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
29 Dec 1964	9 July 1966	15 August 1966	10 September 1966	

10. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

3 - 35, 6, 5

11. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

No unaccompanied assignment

12. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-8)

13. TRAINING DESIRED:

INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

CI course

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

[Redacted]

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- ☐ EXTEND TOUR _____ MONTHS AT CURRENT STATION TO _____ (DATE)
- ☐ BE ASSIGNED TO HQ/DBS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
- ☒ BE ASSIGNED _____ STATION
1ST CHOICE _____
- ☐ RETURN TO MY CURRENT STATION _____

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING. This man has completed a tour separated from his family and has performed competently in which he has done an outstanding job. Believe he would profit by the CI course and another field tour a post where he can be with his family.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

PE Division has no suitable assignment for subject. Request his next assignment be determined by the CS Career Service and that he be advised accordingly.

DATE 02/24/68 TITLE C/EE/DBS SIGNATURE _____

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

Assigned to C/EE/DBS

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED: _____

CABLE NO. _____ DATED: _____

[Redacted]

CAREER SERVICE REPRESENTATIVE: _____ DATE: 02/24/68

SECRET

CONFIDENTIAL

MEMORANDUM FOR: JS Career Management Committee

SUBJECT: Recommendation for Promotion of [redacted]
from GS-12 to GS-13

1. The Vietnam Station has recommended the promotion of [redacted] from GS-12 to GS-13. He has been in his present grade for almost five years. He is already performing at the level normally expected of a GS-13. [redacted] was ranked fifth among all GS-12's currently at Vietnam Station. The Station recommendation as contained in [redacted] is quoted in the following paragraphs.

2. This employee has performed at a highly commendable level during his tour at this Station.

3. Subject displays the qualities of a highly capable, well-rounded officer. He has approached his own tasks with a mature and efficient manner, and has always demonstrated an excellent understanding of the role and mission [redacted] the Station in this area. He appears to be highly motivated, and I consider him an officer with a great deal of long-range potential.

(11 Aug 66)

Chief, [redacted]

Branch

CONFIDENTIAL

CONFIDENTIAL

28 MAR 1967

MEMORANDUM FOR: Chief, FE Division DD/P

SUBJECT : Security Violation - [REDACTED]

1. [REDACTED]

2. [REDACTED]

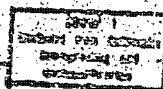
3. It would be appreciated if you would advise this Office by memorandum of the administrative action taken in this case.

fe [REDACTED]
Deputy Director of Security (PTOS)

Att
Violation Report

cc: Deputy Director for Plans
Director of Personnel

CONFIDENTIAL



CONFIDENTIAL

SECURITY VIOLATION REPORT

DETAILS OF VIOLATION:

INVESTIGATIVE FACTS:

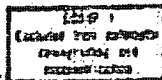
CONCLUSION:

SECURITY HISTORY:

Chief, Survey Branch

Investigator

CONFIDENTIAL



REPUBLIC OF VIETNAM

MERIT COMMENDATION

FOR [] American counterpart to the Police Special Branch of the Directorate General of National Police, who is awarded the Third Class Honorary Police Medal by Decree No. 1744-ND/HP/VP of 24 September 1966.

[] is an outstanding counterpart and a sincere friend of the National Police Branch.

During his period of service in Vietnam, [] devoted all his ability, experience, and good will to helping the Police Special Branch, especially in the task of setting up a people's intelligence net.

The dedication and enthusiasm of [] helped the National Police Branch to achieve excellent results in safeguarding security and maintaining law and order in Saigon, the Capital.

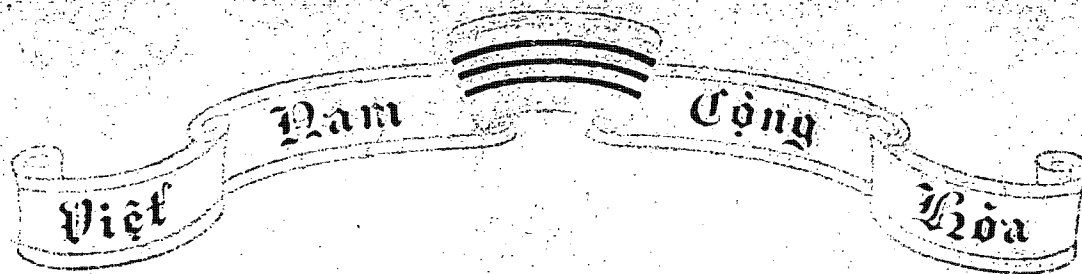
[] spirit of mutual aid merits praise and remembrance.

Saigon, 24 September 1966

Chairman of the Central Executive Committee

/Signed and Sealed/

Air Vice Marshal NGUYEN CAO KY



HÀNG TUYÊN DƯƠNG CÔNG TRẠNG

về [] Phối-trí-viên Hoa-ý cảnh Khố
Cảnh-Sát Đặc-Biệt Tổng Nha Cảnh-Sát Quốc-Gia được
ăn thưởng huy chương Cảnh-sát danh-dự Bội-tinh do
do Nghị-dịnh số 1744-NĐ/HP/VP ngày 24 tháng 9 năm 1966.

[] là một Phối-trí-viên ưu-tú và là
Người bạn chân-thành của ngành Cảnh-Sát Quốc-gia.

Trong thời gian phục-vụ tại Việt-Nam, []
[] đã đem hết khả năng, kinh-nghuận và thiện-chí giúp đỡ Khố
Cảnh-sát Đặc-biệt, nhất là trong công tác đặt lữai tỉnh báo
nhân dân.

Sự tận tâm và lòng nhiệt thành của []
đã giúp cho ngành Cảnh-sát Quốc-gia thân đạt được nhiều kết-
quả tốt đẹp trong công cuộc bảo vệ an-ninh và duy-trì trật-tự
tại Lữ-thành Saigon.

Tinh-thần tương-trợ của [] đáng được
khôn ngẫm và ghi nhớ.

Saigon, ngày 24 tháng 9 năm 1966
CHỦ-TỊCH ỦY-BAN HÀNH-PHÁP TRUNG-ƯƠNG,



NGUYỄN CAO KIỆT

REPUBLIC OF VIETNAM
OFFICE OF THE CHAIRMAN
NATIONAL LEADERSHIP COMMITTEE

CHAIRMAN OF THE CENTRAL EXECUTIVE COMMITTEE

Reference the order of 19 June 1965 which was supplemented by Decree No. 6-QLVNCH/QD of 6 June 1966 of the Armed Forces Council of the Republic of Vietnam;

Reference Decree No. 3-QLVNCH/QD of 14 June 1965 which was supplemented by Decree No. 7-QLVNCH/QD of 6 June 1966 of the Armed Forces Council of the Republic of Vietnam which established and fixed the composition of the National Leadership Council;

Reference Decree No. 001-a/CT/LDQG/SL of 19 June 1965 and all succeeding documents which established and set the composition of the Central Executive Committee;

Reference Decree No. 080-CT/LDQG/SL of 6 September 1965 which created two types of medals, the Police Service Medal and the Honorary Police Medal;

Reference Decree No. 001-CT/LDQG/SL of 21 January 1966 which fixed the methods of awarding the medals mentioned above;

DECREE

Article One. Now the Third Class Honorary Police Medal is awarded American Counterpart to the Police Special Branch of the Directorate General of National Police.

Article Two. The Commissioner General for Security and the Administrative Assistant in the Office of the Chairman of the Central Executive Committee will assume the responsibility for implementing the Decree.

Saigon, 24 September 1966

/Signed and Sealed/

Air Vice Marshal NGUYEN CAO KY

VIỆT-NAM CỘNG-HÒA

Phủ Chủ-Tịch
Ủy-Ban Hành-Pháp Trung-Ương

Số 1744-ND/HF/VP.

Chức Vụ
Ủy-Ban Hành-Pháp Trung-Ương

Chiếu theo-lập ngày 19 tháng Sáu năm 1965 bổ-túc bởi quyết-tính số 6-LV/CH/QĐ ngày 6 tháng Sáu năm 1966 của Đại Hội-Dồng Quốc-Lực Việt-Nam Cộng-Hòa ;

Chiếu quyết-tính số 3-LV/CH/QĐ ngày 14 tháng Sáu năm 1965 bổ-túc bởi quyết-tính số 7-LV/CH/QĐ ngày 6 tháng Sáu năm 1966 của Đại Hội-Dồng Quốc-Lực Việt-Nam Cộng-Hòa thành-lập và ấn-lệnh thành-phần Ủy-Ban Lãnh-Dạo Quốc-Dân ;

Chiếu sắc-lệnh số 001-a/CT/LĐQG/SL ngày 19 tháng Sáu năm 1967 và các văn-khẩu kế-tiếp thành-lập và ấn-lệnh thành-phần Ủy-Ban Hành-Pháp Trung-Ương ;

Chiếu sắc-lệnh số 000-CT/LĐQG/SL ngày 6 tháng Sáu năm 1967 thành-lập hai loại huy-chương "Cảnh-Sát Chiến-Cong Lội-Tinh" và "Cảnh-Sát Dành-Dự Đại-Tinh" ;

Chiếu nghị-tính số 001-CT/LĐQG/HĐ ngày 21 tháng Giêng năm 1966 ấn-lệnh thiế-thức cấp tướng các huy-chương kể trên,

H Ơ Ị - D Ị Ị Ị :

Điều thứ nhất. - Huy an-thưởng Độ-tam đẳng Cảnh-Sát Dành-Dự Đại-Tinh cho Phó-trí-viên Hoa-Kỳ cạnh Khối Cảnh-Sát Đặc-biệt Tổng Mưu Cảnh-Sát Quốc-Gia.

Điều thứ 2. - Tổng-Ủy-Viên An-Hình và Phụ-Tả Hành-Chánh tại Phủ Chủ-Tịch Ủy-Ban Hành-Pháp Trung-Ương, chiếu nhiệm-vụ, lãnh thi-hành Nghị-tính này.

Saigon, ngày 24 tháng 9 năm 1966



[Handwritten signature]

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
9-9 <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px auto;"></div>	(Print) <div style="border: 1px solid black; width: 120px; height: 20px; margin: 5px auto;"></div>	7-24		25-29 45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ORR ORTD). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	ARRIVAL				DEPARTURE				COUNTRY	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR			
1 - PCS (Basic)	27	20-29	30-31	32-33	34-35	36-37	38-39	VIET NAM	40-42	
3 - CORRECTION										
5 - CANCELLATION	1				07	11	66		7-22	

TDY DATES OF SERVICE

TYPE OF DATA	DEPARTURE				RETURN				AREA(S)	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR			
2 - TDY (Basic)	27	20-29	30-31	32-33	34-35	36-37	38-39		40-42	
4 - CORRECTION										
6 - CANCELLATION										

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input checked="" type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify):	

DOCUMENT IDENTIFICATION NO. <div style="border: 1px solid black; width: 80px; height: 20px; margin: 5px auto;"></div>	DOCUMENT DATE/PERIOD 7-14-66
--	---------------------------------

PREPARED BY USA	REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & S DIVISION	DATE 7-21-66	SIGNATURE <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>
C & S DIVISION		

FORM 1451a USE PREVIOUS EDITIONS

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(4-10)

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters.

EMPLOYEE SERIAL NO. 1-8	NAME OF EMPLOYEE			OFFICE/COMPONENT 25-28
	LAST (Print)	FIRST 7-24	MIDDLE	
<div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="border: 1px solid black; width: 250px; height: 20px;"></div>			45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION. (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA 1. PCS (Basic) 3. CORRECTION 5. CANCELLATION	ARRIVAL				DEPARTURE				COUNTRY	OMIT 40-42
	CODE 27	MONTH 28-29	DAY 30-31	YEAR 32-33	MONTH 34-35	DAY 36-37	YEAR 38-39			
	1	12	29	64					VIET NAM	772

TDY DATES OF SERVICE

TYPE OF DATA 2. TDY (Basic) 4. CORRECTION 6. CANCELLATION	DEPARTURE				RETURN				AREA(S)	OMIT 40-42
	CODE 27	MONTH 28-29	DAY 30-31	YEAR 32-33	MONTH 34-35	DAY 36-37	YEAR 38-39			

SOURCE OF RECORD DOCUMENT

TRAVEL VOUCHER	<input checked="" type="checkbox"/> DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY:

REPORT ANNOTATED ON
SOURCE DOCUMENTABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE
DOCUMENT CITED

D & I DIVISION

DATE

SIGNATURE

FORM 1451a USE PREVIOUS EDITIONS.

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(14-10)

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 20-30
	LAST (Print)	FIRST	MIDDLE	
				45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	97	28-29	30-31	32-33	34-35	36-37	38-39		40-42
2 - CORRECTION									
3 - CANCELLATION	1				09	23	62		375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39	40-42	
4 - CORRECTION									
5 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. FORM - 764	DOCUMENT DATE/PERIOD 2 Sept - 23 Sept 62
--	--

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	DATE 16 OCT 1962	SIGNATURE
FINANCE DIVISION <i>SW</i>		

FORM 1451a OBSOLETE PREVIOUS EDITIONS.

SECRET

(4-10)

SECRET

100

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE				FOR HEADQUARTERS USE ONLY		DO NOT COMPLETE	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:							
NAME (Last)		DATE (from item 1)		NAME OF SUPERVISOR (Last)		DATE (from item 2)	
[Redacted]		Jan 1962		[Redacted]		Jan 1962	
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:						DATE	
[Redacted]						12 Feb 1962	
TO BE COMPLETED BY EMPLOYEE							
1. DATA [Redacted]		2. GRADE		3. CURRENT POSITION TITLE			
[Redacted]		GS-12		[Redacted]			
4. SERVICE DESIGNATION (if known)		5. CURRENT STATION OR FIELD BASE					
NA		[Redacted]					
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR						7. EXPECTED DATE OF DEPARTURE	
NA						September 1962	
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR:							
[Redacted]							
9. PREFERENCE FOR NEXT ASSIGNMENT: [Redacted]							
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.							
SAME							
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):							
Language Training							

SECRET

B. PREFERENCE FOR NEXT ASSIGNMENT (continued)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:

☐ RETURN TO MY CURRENT STATION ☒ BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF 24TH

☒ BE ASSIGNED TO ANOTHER FIELD STATION

WITH RESPECT TO A POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE YOUR 1ST, 2ND AND 3RD CHOICE FOR GEOGRAPHIC AREA OR SPECIFIC STATION:

1ST CHOICE:

2ND CHOICE:

3RD CHOICE:

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?
30 days

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:
Three: 32, 30 months, 18 months

12. SIGNATURE: COMPLETE ITEM NO. 3-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION:

13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

In view of this officer's field experience and his competent performance as , his continued assignment to a field station would soon to be in the best interests of KUBARK.

14. SIGNATURE: COMPLETE ITEM NO. 3-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.
TO BE COMPLETED BY APPROPRIATE SUPERVISOR AT HEADQUARTERS:

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE DIVISION TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

FE Division concurs.

"The staffing plans of St/FM call for the assignment of to analytical duties on his return to Headquarters in the fall of 1962."

16. NAME OF SUPERVISOR:

TITLE:

Personnel Officer, ORR

20 March 1962

17. REMARKS (additional comment):

was notified of his planned reassignment in Memorandum No. 363, dated 14 March 1962.

21 MAR

Acting Secretary, ORR Career Service Board

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
1-8	(Print)	7-24		25-30
<div></div>	<div></div>	<div></div>		18

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	UNIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
2 - CORRECTION									
3 - CANCELLATION									
	1	29	04	59					375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	UNIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
3 - CORRECTION									
4 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	10 AUG. - 5 SEP. 59

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT, BASED UPON SOURCE
<input checked="" type="checkbox"/> FISCAL DIVISION	DATE 21 APR. 60	SIGNATURE <div></div>
<input checked="" type="checkbox"/> FINANCE DIVISION		

FORM 1451a 3000000 PREVIOUS EDITIONS

SECRET

(4-10)

Office of Training
TRAINING REPORT

Instructor Training Course No. 60
40 hours, 30 Oct. - 3 Nov. 1961

6 students

Student:

Year of birth:

EOB Date: June 1955

Grade: 11

Office: Orr/

COURSE OBJECTIVES, CONTENT, AND METHODS

The Objectives of this course are:

1. To develop an acquaintance with the learning processes.
2. To apply the principles of learning and instruction in practical teaching experiences.

This course included planning and practical teaching work in: principles of learning and teaching; effective oral communication; demonstration techniques; training aids; elements of effective class discussions; principles of lesson planning; all based upon the implementation of the principles of learning. Due to the shortness of the course, familiarization only was attempted with the above aspects of teaching.

During this course, each student presented to the class a sample speech, demonstration, a class discussion, and lesson plan, all related to his own subject matter area. These presentations were critiqued and voted by his classmates and the instructor. Over half of the students' course time was spent in practical exercises.

ACHIEVEMENT RECORDED

This student has satisfactorily accomplished the course objectives and met the course standards in presenting his exercises. has a pleasant manner of speaking, and with each presentation to the class his effectiveness increased. He was able to use visual aids effectively to good advantage, and he made worthwhile suggestions for improving the presentations of others. He evidenced a sound grasp of the principles of lesson plan format.

Despite his noticeable progress during the course, needs to show more interest in his students and regularly maintain good eye contact with his entire class. By giving continual attention and practice to vocal variety, overt manifestations of enthusiasm, and the establishment of closer rapport with the students, should be able to increase considerably his competence as an instructor.

FOR THE DIRECTOR OF TRAINING:

9 NOV 1961

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		DO NOT COMPLETE	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:					
NAME OF EMPLOYEE (true)		DATE (from item 1)		NAME OF SUPERVISOR (true)	
		21 March 1961		67 21 March 1961	
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:				DATE	
TO BE COMPLETED BY EMPLOYEE					
1. DATE OF BIRTH		2. GRADE		3. CURRENT POSITION TITLE	
		GS-11		Identification Specialist	
4. SERVICE DESIGNATION (if known)		5. CURRENT STATION OR FIELD BASE			
NA					
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR				7. EXPECTED DATE OF DEPARTURE	
NA				11 C 610 October 1961	
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form)					
9. PREFERENCE FOR NEXT ASSIGNMENT:					
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.					
SAME					
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available).					
Language Training					

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)

10. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

11. RETURN TO MY CURRENT STATION ☐ BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY ☐ BE ASSIGNED TO ANOTHER FIELD STATION ☒ WITH RESPECT TO A POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE YOUR GEOGRAPHIC AREA OR SPECIFIC STATION: MAN-ROON

1ST CHOICE: MAN-ROON
2ND CHOICE: MAN-ROON
3RD CHOICE: MAN-ROON

12. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?

30 Days

INDICATE NUMBER OF WORK DAYS

13. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:
Three, 51, 23 months, 8 months

14. SIGNATURE: COMPLETE ITEM NO. 8-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE DIVISION TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

EE Division recommends subject be reassigned by the IA Career Board.

Headquarters recommends extension of tour for another year.

Personnel Officer, ORR

16. NAME OF SUPERVISOR:

SIGNATURE:

TITLE:

DATE:

17. REMARKS (additional comments)

SECRET

SECRET

18 April 1961

MEMORANDUM FOR THE RECORD

SUBJECT: Outstanding Advance Balance [redacted]

1. This memorandum is to be made a part of subject's personnel file, by direction of Acting Chief, [redacted]
2. As stated in Paragraph 4 of the [redacted] Audit Report for the period 1 September 1960 through 28 February 1961, subject has an outstanding balance of \$167.62 in his travel advance account. The advance has been open since 8 December 1960, despite repeated efforts on the part of Finance to close the account.
3. The balance referred to above is computed as follows:

8 December 1960 - Travel advance	\$500.00
22 March 1961 - Accounting for travel for period 10-18 December 1960	332.38
Balance Outstanding	<u>\$167.62</u>
4. Finance Memorandum 61-19 dated 17 April 1961 again requested that the balance be refunded and the account closed. An addendum to this memorandum, signed by Acting Deputy for Operations, informed [redacted] that he was to refund the balance no later than COB 17 April 1961.
5. [redacted]'s written reply to the memo stated that he would refund the balance no later than 28 April 1961, upon receipt of a bank deposit slip from PBPRIME.
6. After further discussion between [redacted] and the undersigned, [redacted] were sent to Headquarters requesting an immediate transfer of \$167.62 from subject's Credit Union account to Finance Division for T/A [redacted].
7. Subject has been informed that no further advances of official funds will be made to him, except for housing expenses and the exact cost of tickets necessary for official travel.

[redacted]
Finance Officer

Distribution

- ✓ 1 - PERS
- 2 - FIM
- 1 - A/DOPS

SECRET

TSS/PB/TRAINING DIVISION EVALUATION

DARKROOM 9

BASIC PHOTOGRAPHY No. 1

NAME DIV. CR1 BR. 1A DATES TRAINED: from 23 June to 17 July '71

This course is primarily designed to develop the following skills: Use of 35 mm cameras with accessories, document copy, processing and printing.

	None	Unsat.	Fair	Good	Excellent	Superior
I. Manipulation of camera.						
a. Leica				X		
b. Retina II C	X					
c. Recordak				X		
II. Processing and printing.						
a. Film loading				X		
b. Film processing				X		
c. Enlarging				X		
d. Reflex and contact printing					X	
III. Use of accessory equipment.						
a. Exposure meter				X		
b. Filters	X					
c. Telephoto and wide angle lenses				X		
IV. Document copy and small objects.						
a. Available light	X			X		
b. Accessory illumination				X		
c. BOOWU, porta lens, focus slide				X		
V. Ground photography.						
a. Coverage						
b. Report	X					
VI. Casing.						
a. Coverage						
b. Report						
VII. Surveillance.						
a. Coverage						
b. Report						
VIII. Special problems.						
a. Coverage						
b. Report						
General quality of prints				X		
Choice of subject matter				X		
Quality of darkroom work (Cleanliness, etc.)				X		
Attitude toward subject matter				X		
Cooperation					X	

REMARKS:

 met the course objectives and completed all of the course assignments for this two weeks he attended with average results.

Overcoming some difficulty at the outset, soon overcame many of his problems in the two week time. He demonstrated an eagerness to learn, by asking to be checked out in not only course equipment, but other equipment as well. He also offered to complete additional assignments on his own time.

It is suggested he continue his practice and association with photography in order to maintain and improve present proficiency.

APPROVED
C/TSS/TO
Instructor

SECRET
(When Filled In)

**PERIODIC SUPPLEMENT
PERSONAL HISTORY STATEMENT**

THIS DATE

INSTRUCTIONS

This form provides the space whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XII only if there has been a change since you entered on duty with the organization or if you believe the data requires more complete coverage than you have previously reported.

SECTION I

GENERAL

1. FULL NAME John Edward Miller

2. CURRENT ADDRESS [Redacted] (No., Street, City, State)

3. PERMANENT ADDRESS (No., Street, City, Zone, State)

4. HOME TELEPHONE NUMBER

5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE

SECTION II

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME <u>John Edward Miller</u>	
2. M	
3. D	
4. H	
5. IN	

IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.

SECTION III

MARITAL STATUS

1. CHECK (X) ONE:

☐ SINGLE

☒ MARRIED

☐ SEPARATED

☐ DIVORCED

☐ ANNULLED

2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancé.

3. NAME

(First)

(Last)

10. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)

SECTION III CONTINUED TO PAGE 2

SECRET
(When Filled In)

SECTION V CONTINUED FROM PAGE 2

9. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
	Wash. D.C.
	Arlington, Va

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY?

YES

☒ NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)

SECTION VI

CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP

2. CITIZENSHIP ACQUIRED BY - CHECK (A) ONE:

☐ BIRTH

☐ MARRIAGE

☐ OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? ☐ YES ☒ NO

4. GIVE PARTICULARS:

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (FEEB, PAPER, ETC.)

SECTION VII

EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

LESS THAN HIGH SCHOOL GRADUATE

OVER TEN YEARS OF COLLEGE - NO DEGREE

HIGH SCHOOL GRADUATE

BACHELOR'S DEGREE

TRADING, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE

GRADUATE STUDY LEADING TO HIGHER DEGREE

TWO YEARS COLLEGE OR LESS

MASTER'S DEGREE

DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY

SUBJECT

DATES ATTENDED

DEGREE REC'D

DATE REC'D

STATUS AND COMPLETED (Specify)

MAJOR

MINOR

FROM

TO

FROM

TO

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL

STUDY OR SPECIALIZATION

DATES ATTENDED

FROM

TO

TOTAL CREDITS

4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)

NAME OF SCHOOL

STUDY OR SPECIALIZATION

DATES ATTENDED

FROM

TO

TOTAL CREDITS

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET

DESIGNATION OF BENEFICIARY
FEDERAL EMPLOYEES' GROUP LIFE
INSURANCE ACT OF 1951

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)

DEPARTMENT OR AGENCY IN WHICH EMPLOYED (If retired, so state and give "CSA" or "CSI" number):

(Department or agency)	(Bureau)	(Division)
------------------------	----------	------------

I, the employee or annuitant identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees' Group Life Insurance Act heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of GROUP LIFE INSURANCE and GROUP ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as I become insured in a department or agency other than the above, or until such time as I become insured as a retired employee, in which event this Designation of Beneficiary shall terminate.

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change any Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

August 30, 1956

(Date of execution—month, day, year)

(Signature of insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

PRINT OR TYPE NAME AND ADDRESS OF INSURED

--

THIS SPACE RESERVED FOR RECEIVING AGENCY

MAIL ROOM

SEP 31 11 27 AM '56
U. S. CIVIL SERVICE COMMISSION

IF EMPLOYED AS AN EMPLOYEE, SEND BOTH COPIES TO THE FEDERAL OFFICE OF PERSONNEL MANAGEMENT, WASHINGTON, D. C. 20535. IF EMPLOYED AS AN ANNUITANT, SEND BOTH COPIES TO THE CIVIL SERVICE COMMISSION, WASHINGTON, D. C. 20535. COPIES WILL BE NOTED AND RETURNED.

IMPORTANT.--The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees' Group Life Insurance Act you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any group life and accidental death insurance payable under that act at your death.

EXAMPLES OF DESIGNATIONS

How To Designate ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To Designate MORE THAN ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To Designate A CONTINGENT BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To CANCEL A DESIGNATION OF BENEFICIARY SO THAT AMOUNT DUE WILL BE PAYABLE AS PROVIDED IN THE LAW

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations.			

*Do not write names as Mr. E. Brown or as Mrs. John H. Brown.

**Be sure that the shares to be paid to the named beneficiaries add up to 100 percent.

19-7084-1

CONFIDENTIAL

TO : Chief, Fiscal Division 1405 Alcott Hall
FROM : Chief, Records and Services Division
SUBJECT: SF-2808

Attached is SF-2808 (Designation of Beneficiary) for:



Date 21 JUN 1955

Please sign second copy and return to:

Chief, Transactions and Records Branch
Room 187
Curio Hall



CONFIDENTIAL

APPOINTMENT AFFIDAVITS

IMPORTANT.— Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

WASHINGTON, D.C.

(Bureau or division)

(Place of employment)

I, , do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

15 June 1955

(Date of entrance on duty)

Subscribed and sworn before me this 15th day of June, A. D. 1955

at Washington, D.C.

(City)

(State)

[SEAL]

NOTE.— If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)

1 (a)	
1 (b)	

2. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE EVER LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO
If no, for each such relative fill in the blanks below. If additional space is necessary, complete under item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE
		1. 2.			
		1. 2.			
		1. 2.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
3. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
4. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in item 10.</i>		X		
7. TO YOU INCUR ANY ANNUITY FROM THE UNITED STATES OR PAYMENT OF COMPENSATION OR BENEFIT UNDER ANY OTHER PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in item 10 reason for retirement, that is, age, physical disability, or the reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and rating, if retired from military or naval service.</i>		X		
8. SINCE THE FILED APPLICATION HEREIN THE APPLICANT HAVE YOU BEEN EMPLOYED OR ENGAGED IN ANY POSITION OF UNPAID FACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in item 10 the name and address of employer, date and reason in each case.</i>		X		
9. HAVE YOU BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED UNDER \$50 OR FOR VIOLATION OF FEDERAL LAWS) SINCE YOU FILED APPLICATION HEREIN IN THIS APPLICATION? <i>If your answer is "Yes", list all such cases under item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed; (5) any other disposition of the case. If appointed, your fingerprints will be taken.</i>		X		

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the applicant is eligible to be appointed to the position for which he is applying. He shall also determine that the applicant is not a person who is prohibited from being appointed to the position for which he is applying by the laws of the United States or by the laws of any State, Territory, County, or Municipality.

(1) *Eligibility of applicant*—It is the duty of the appointing officer to determine to his own satisfaction that the applicant is eligible to be appointed to the position for which he is applying. He shall also determine that the applicant is not a person who is prohibited from being appointed to the position for which he is applying by the laws of the United States or by the laws of any State, Territory, County, or Municipality.

(2) *Age*—If definite age limits have been established for the position, it should be determined that applicant is not outside the range for appointment. Until such determination is made, the applicant should not be recommended.

(3) *Citizenship*—The appointing officer is responsible for ascertaining the citizenship of the applicant. He should determine that the applicant is a citizen of the United States or a person who is eligible to become a citizen of the United States.

(4) *Members of family*—Section 1 of the Civil Service Act prohibits appointment of persons who are closely related to members of a family serving under the Government of the United States. The appointing officer should determine that the applicant is not a member of such family.

Standard Form No. 64
September 1954
U. S. Civil Service Commission
F. P. M. Chapter 21

DESIGNATION OF BENEFICIARY
FEDERAL EMPLOYEES' GROUP LIFE
INSURANCE ACT OF 1954

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)

OBJECT OF DESIGNATION: [Redacted]

DEPARTMENT OR AGENCY IN WHICH EMPLOYED (If retired, so state and give "CSA" or "CSI" number):

CIA (Department or agency) (Bureau) (Division)

I, the employee or annuitant identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees' Group Life Insurance Act heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of GROUP LIFE INSURANCE and GROUP ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as I become insured in a department or agency other than the above, or until such time as I become insured as a retired employee, in which event this Designation of Beneficiary shall terminate.

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiary is living at the time of my death. I hereby specifically reserve the right to cancel or change any Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

JUNE 15, 1955

(Date of execution—month, day, year)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

[Redacted]

PRINT OR TYPE NAME AND ADDRESS OF INSURED

[Redacted]

THIS SPACE RESERVED FOR RECEIVING AGENCY

Rec'd Off of Personnel
6/15/55

[Redacted]

(Indicate date and by whom received)

IF ISSUED AS AN EMPLOYEE, GIVE BOTH COPIES TO THE PROPER OFFICE OF YOUR AGENCY—DUPLICATE WILL BE NOTED AND RETURNED. IF ISSUED AS AN ANNUITANT, SEND BOTH COPIES TO THE CIVIL SERVICE COMMISSION, WASHINGTON 25, D. C.—DUPLICATE WILL BE NOTED AND RETURNED.

IMPORTANT.—The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees' Group Life Insurance Act you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any group life and accidental death insurance payable under that act at your death.

EXAMPLES OF DESIGNATIONS

How To Designate One Beneficiary

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To Designate More Than One Beneficiary

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To Designate A Contingent Beneficiary

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary

How To Cancel A Designation Of Beneficiary So That Amount Due Will Be Payable As Provided In The Law

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

*Do not write name as M. R. Brown or as Mrs. John H. Brown.
 **Be sure that the shares to be paid to the several beneficiaries add up to 100 percent.

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for leave purposes and retention credits for reduction in force. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I—EMPLOYEE'S STATEMENT

1. NAME (Last, first, middle initial)

[Redacted]

2. DATE OF BIRTH

[Redacted]

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
CIA	55	6	15				

4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."

BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
U.S. ARMY	1952	NOV	17	1959	MAY	16	HON.

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? ☐ YES ☒ NO
IF ANSWER IS "YES," LIST FOLLOWING INFORMATION:

TYPE IF KNOWN (LWOP, Phil. Serv., AWOL, Mat. Mar.)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? ☐ YES ☒ NO
(If answer is "Yes," in what agency were you employed at the time status was acquired?)

7. ARE YOU:

- A. THE WIFE OF A DEADLY VETERAN? ☐ YES ☒ NO
B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? ☐ YES ☒ NO
C. THE UNDEVELOPED WIDOW OF A VETERAN? ☐ YES ☒ NO

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

15 June 1955
(DATE)

(SIGNATURE)

Subscribed and sworn to before me on this 15th day of June 1955 at Washington, D.C.
(MONTH) (YEAR) (CITY) (STATE)

SEAL

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

PART II—THIS COLUMN IS FOR PERSONNEL OFFICE USE

9. RETENTION GROUP

10. CSC STATUS (For permanent employees only)

☐ YES ☒ NO

11. SERVICE

YEAR MONTH DAY

2 00 00
1 1 29

12. TOTAL SERVICE

1 1 29

13. NONCREDITABLE SERVICE (Leave purposes only)

14. NONCREDITABLE SERVICE (RIF purposes only)

15. REEMPLOYMENT RIGHTS

☐ YES ☒ NO

16. RETENTION RIGHTS

☐ YES ☒ NO

17. EXPIRATION DATE OF RETENTION RIGHTS

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 13)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS
55	5	45
1	1	29
54	4	16

*verified
1/11/57*

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction
in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 13)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)
(Enter as the "service computation date" on the employee's "Service Record Card," SF-7)

YEARS	MONTHS	DAYS

REMARKS:

SECRET

1. NAME (Last, First, Middle) [Redacted]		2. DATE OF BIRTH [Redacted]	3. GRADE GS-13
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/EE/[Redacted]		5. PRESENT POSITION Ops Officer - [Redacted]	6. EMPLOYEE EXTENS. 6109
7. PROPOSED STATION [Redacted]		8. PROPOSED POSITION (Title, Number, Grade) OPS Officer-4947-GS-13	
9. [Redacted]		10. ESTIMATED DATE OF DEPARTURE 10 May 1969	11. NO. OF DEPENDENTS TO ACCOMPANY 3
12. COMMENTS Request evaluation of current medical for proposed PCS assignment			
[Redacted]			
13. DATE OF REQUEST 24 Jan 1969	14. [Redacted]	15. ROOM NUMBER AND BUILDING 5 U 22	16. EXTENSION 6109
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
[Redacted]			
18. OFFICE OF SECURITY DISPOSITION			
[Redacted]			
OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION			
27 MAR 1969 GALLIMOD, J. B. [Redacted] Chairman, Overseas [Redacted]			
REQUEST FOR PCS OVERSEAS EVALUATION			

259a USE PREVIOUS EDITIONS

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(4)

SECRET

1. NAME (Last, First, Middle) [REDACTED]		2. DATE OF BIRTH [REDACTED]		3. GRADE GS-12	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/TE [REDACTED]		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 140	
7. PROPOSED STATION [REDACTED]		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/441/GS-13			
9. [REDACTED]		10. ESTIMATED DATE OF DEPARTURE 1 June 1968		11. NO. OF DEPENDENTS TO ACCOMPANY 3	
12. COMMENTS Request that Subject's [REDACTED] physical be re-evaluated for the above PCS assignment.					
13. DATE OF REQUEST 23 December 1967		14. SIGNATURE OF REQUESTING OFFICIAL [REDACTED]		15. ROOM NUMBER AND BUILDING 5 E 22	
16. EXTENSION 6109					
17. OFFICE OF MEDICAL SERVICES DISPOSITION [REDACTED]					
18. OFFICE OF SECURITY DISPOSITION [REDACTED]					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION [REDACTED]					
REQUEST FOR PCS OVERSEAS EVALUATION					

14-00000

fel

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? Yes
(Yes or No)

SEC. 1. PERSONAL BACKGROUND

Telephone: _____

[Empty box for personal background information]

..... UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE
NAMES?

HOW LONG? IF A LEGAL CHANGE, GIVE PARTICULARS

(Where?)

(By what authority)

[Empty box for details of legal change]

..... HELD BETWEEN WHAT DATES? TO ANY OTHER NATIONALITY?

(Country)

GIVE PARTICULARS

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? NA GIVE PARTICULARS:

[Empty box for additional information]

(21)

K. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? 1941

PORT OF ENTRY? ON PASSPORT OF WHAT COUNTRY?

LAST U. S. VISA			
(Number)	(Type)	(Place of Issue)	(Date of Issue)

SEC. 2 PHYSICAL DESCRIPTION

AGE SEX HEIGHT WEIGHT

EYES HAIR COMPLEXION SCARS

BUILD **OTHER DISTINGUISHING FEATURES**

SEC. 3. MARITAL STATUS

A. SINGLE MARRIED / DIVORCED WIDOWED

STATE: DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

D. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

MILITARY SERVICE FROM 1944 TO 1945 BRANCH OF SERVICE ARMY
(Date) (Date)

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? 1/1

PORT OF ENTRY? ON PASSPORT OF WHAT COUNTRY?

LAST U. S. VISA
(Number) (Type) (Place of Issue) (Date of Issue)

Sec. 2. PHYSICAL DESCRIPTION

AGE SEX HEIGHT WEIGHT

EYES HAIR COMPLEXION SCARS

BUILD OTHER DISTINGUISHING FEATURES

Sec. 3. MARITAL STATUS

A. SINGLE MARRIED ☒ DIVORCED WIDOWED

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

MILITARY SERVICE FROM 1/1 TO BRANCH OF SERVICE
(Date) (Date)

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)
2. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)
3. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME
(First) (Middle) (Last)
LIVING OR DECEASED DATE OF DECEASE CAUSE
PRESENT, OR LAST, ADDRESS
(St. and Number) (City) (State) (Country)
DATE OF BIRTH PLACE OF BIRTH
(City) (State) (Country)
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
CITIZENSHIP WHEN ACQUIRED? WHERE?
(City) (State) (Country)
OCCUPATION LAST EMPLOYER
EMPLOYER'S OR OWN BUSINESS ADDRESS
(St. and Number) (City) (State) (Country)
MILITARY SERVICE FROM TO BRANCH OF SERVICE
(Date) (Date)
COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME
(First) (Middle) (Last)
LIVING OR DECEASED DATE OF DECEASE CAUSE
PRESENT, OR LAST, ADDRESS
(St. and Number) (City) (State) (Country)
DATE OF BIRTH PLACE OF BIRTH
(City) (State) (Country)
CITIZENSHIP WHEN ACQUIRED? WHERE?
(City) (State) (Country)
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

(4)

OCCUPATION LAST EMPLOYER

EMPLOYER'S OR OWN BUSINESS ADDRESS
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM TO BRANCH OF SERVICE

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 7. BROTHERS AND SISTERS (Including half, step, and adopted brothers and sisters):

1. FULL NAME AGE
(First) (Middle) (Last)PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)2. FULL NAME AGE
(First) (Middle) (Last)PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)3. FULL NAME AGE
(First) (Middle) (Last)PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)4. FULL NAME AGE
(First) (Middle) (Last)PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)5. FULL NAME AGE
(First) (Middle) (Last)PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 16/11CITIZENSHIP 1/1/11 WHEN ACQUIRED? 1/1/11 WHERE?
(City) (State) (Country)OCCUPATION LAST EMPLOYER

SEC. 9. MOTHER-IN-LAW

OCCUPATION NA LAST EMPLOYER _____

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

1. NAME NA RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

1. NAME NA RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

(14)

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME _____ RELATIONSHIP _____

ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT WASHINGTON, D. C.
(City and State)

DATE AUG 30, 1956

(Witness)



USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

PERSONAL HISTORY STATEMENT

Write "RA" with
to obtain the answers from
search for names details on
and from
or will not receive credit

INSTRUCTIONS

1. Fill in the
Other names, dates
and dates
and dates

2. Fill in the
and dates

3. Fill in the
and dates

4. Fill in the
and dates

5. Fill in the
and dates

6. Fill in the
and dates

7. Fill in the
and dates

8. Fill in the
and dates

9. Fill in the
and dates

10. Fill in the
and dates

11. Fill in the
and dates

12. Fill in the
and dates

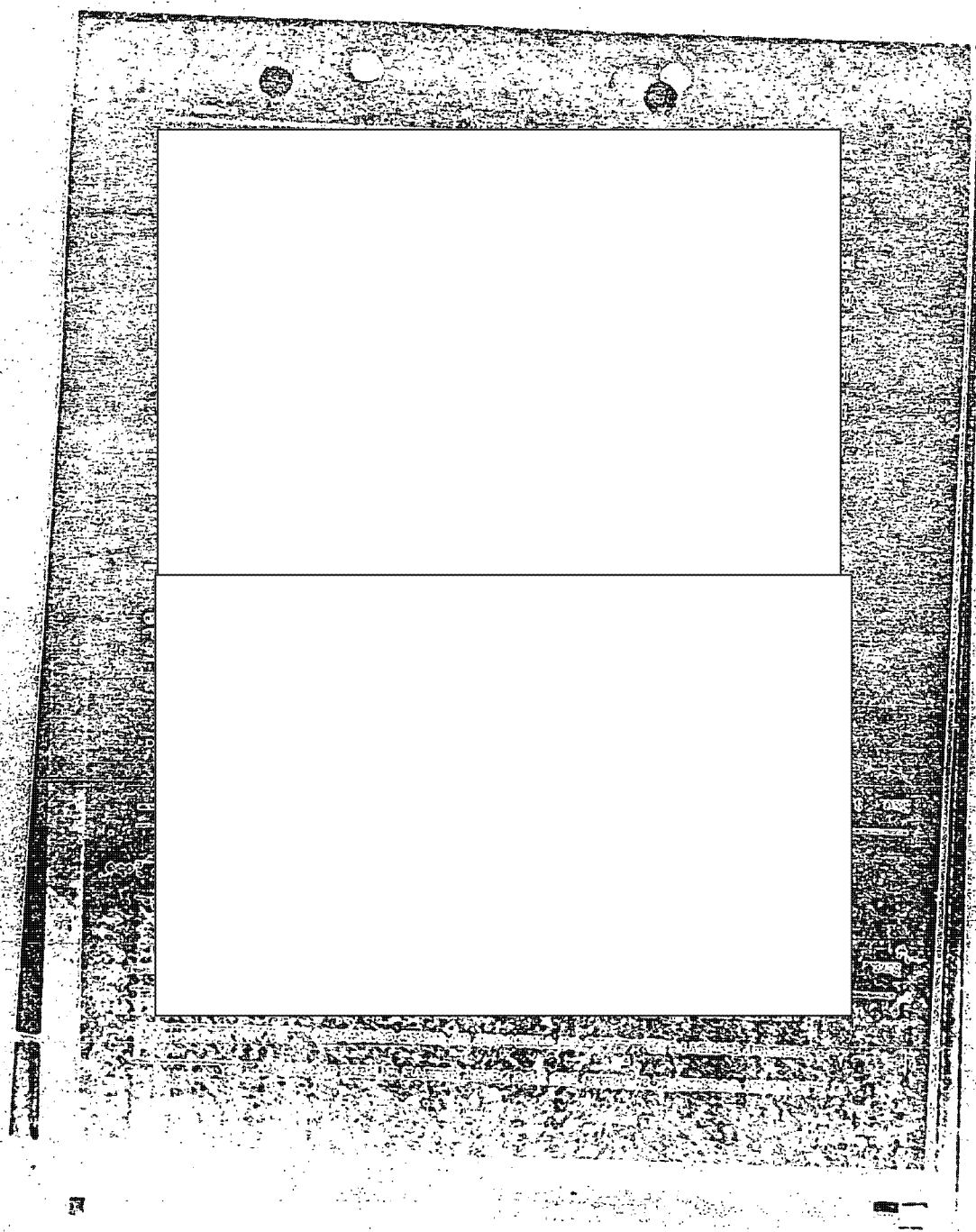
13. Fill in the
and dates

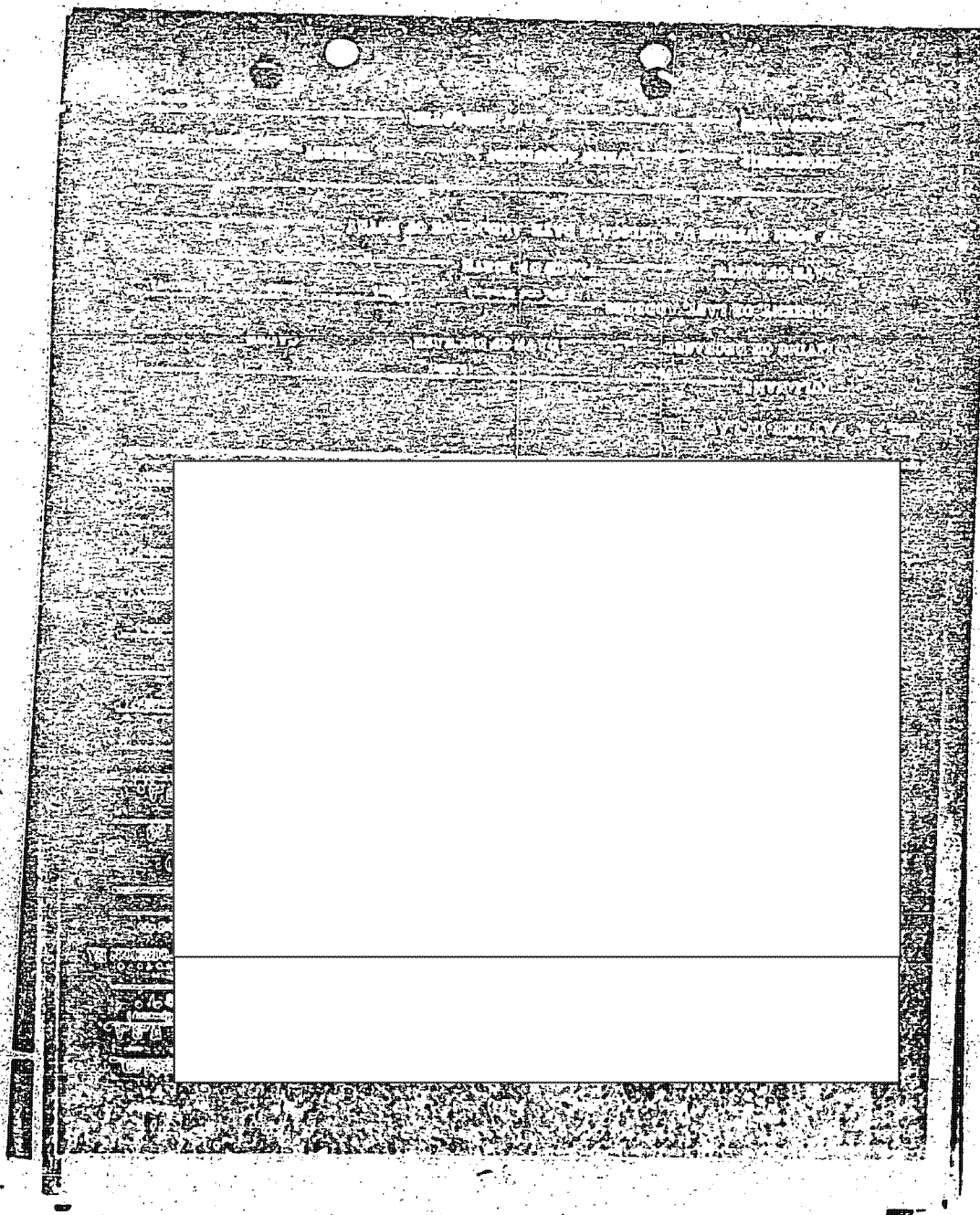
14. Fill in the
and dates

15. Fill in the
and dates

16. Fill in the
and dates

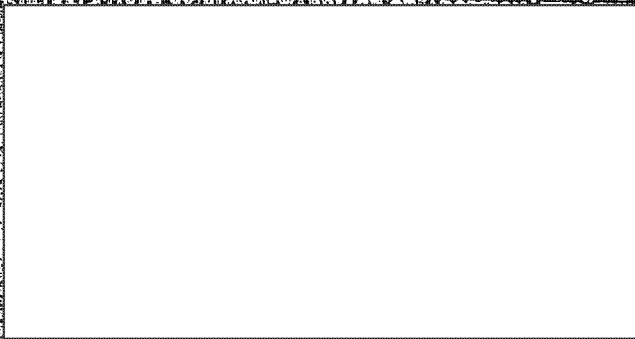
17. Fill in the
and dates



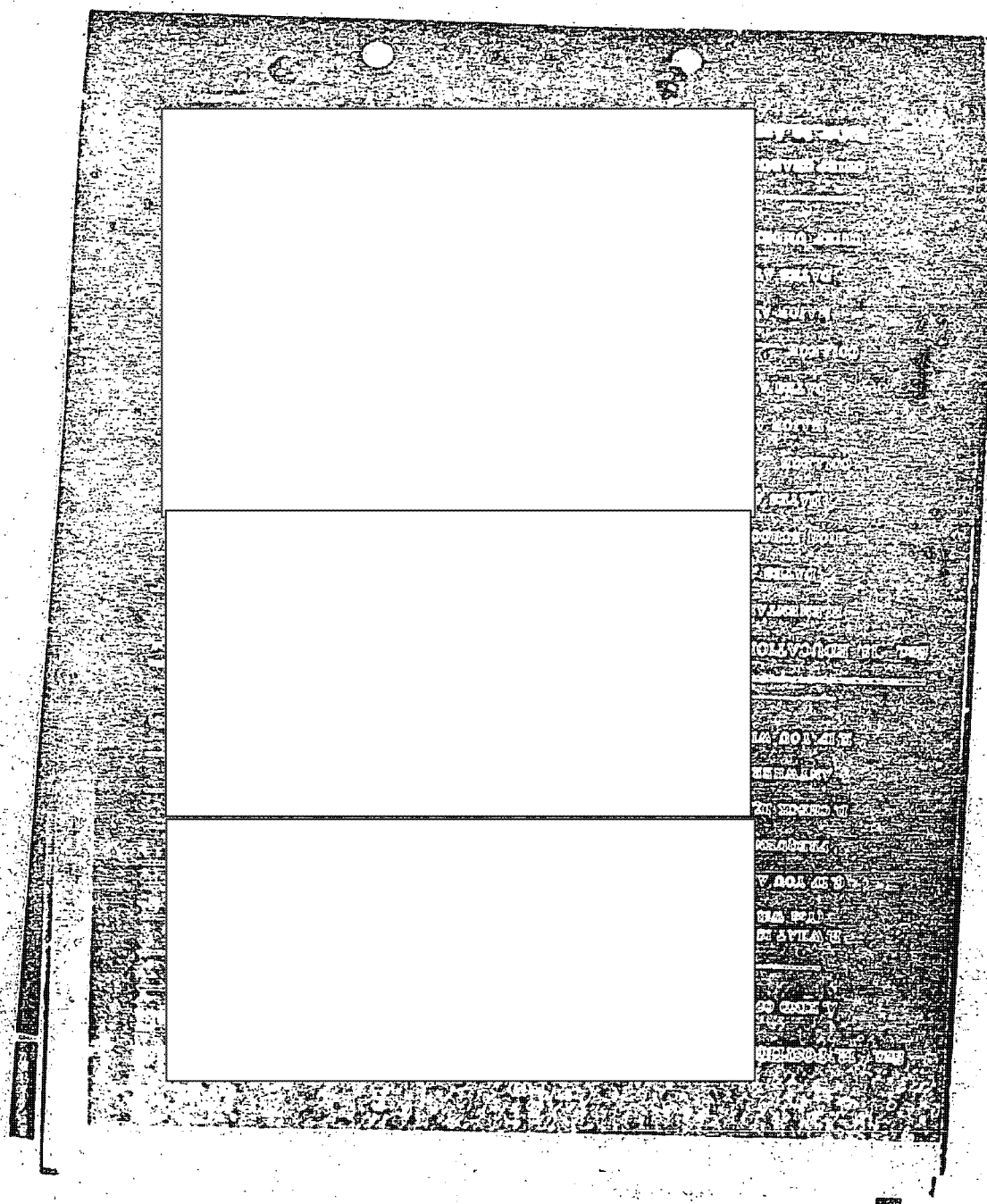


10-00000
SECTION 2. MOTHER-IN-LAW

FULL NAME _____
LIVING OR DECEASED _____ DATE OF DECEASE _____ CAUSE _____
PRESENT OR LAST ADDRESS _____
DATE OF BIRTH _____ PLACE OF BIRTH _____
IF BORN OUTSIDE U.S. GIVE DATE DATE AND PLACE OF ENTRY _____
CITIZENSHIP _____ WHEN ACQUIRED _____ WHEREBY _____
OCCUPATION _____ LAST EMPLOYER _____



REMARKS



1.1.1.1

1.1.1.2

1.1.1.3

1.1.1.4

1.1.1.5

1.1.1.6

1.1.1.7

1.1.1.8

1.1.1.9

1.1.1.10

1.1.1.11

1.1.1.12

1.1.1.13

1.1.1.14

1.1.1.15

1.1.1.16

1.1.1.17

1.1.1.18

1.1.1.19

1.1.1.20

1.1.1.21

1.1.1.22

1.1.1.23

1.1.1.24

1.1.1.25

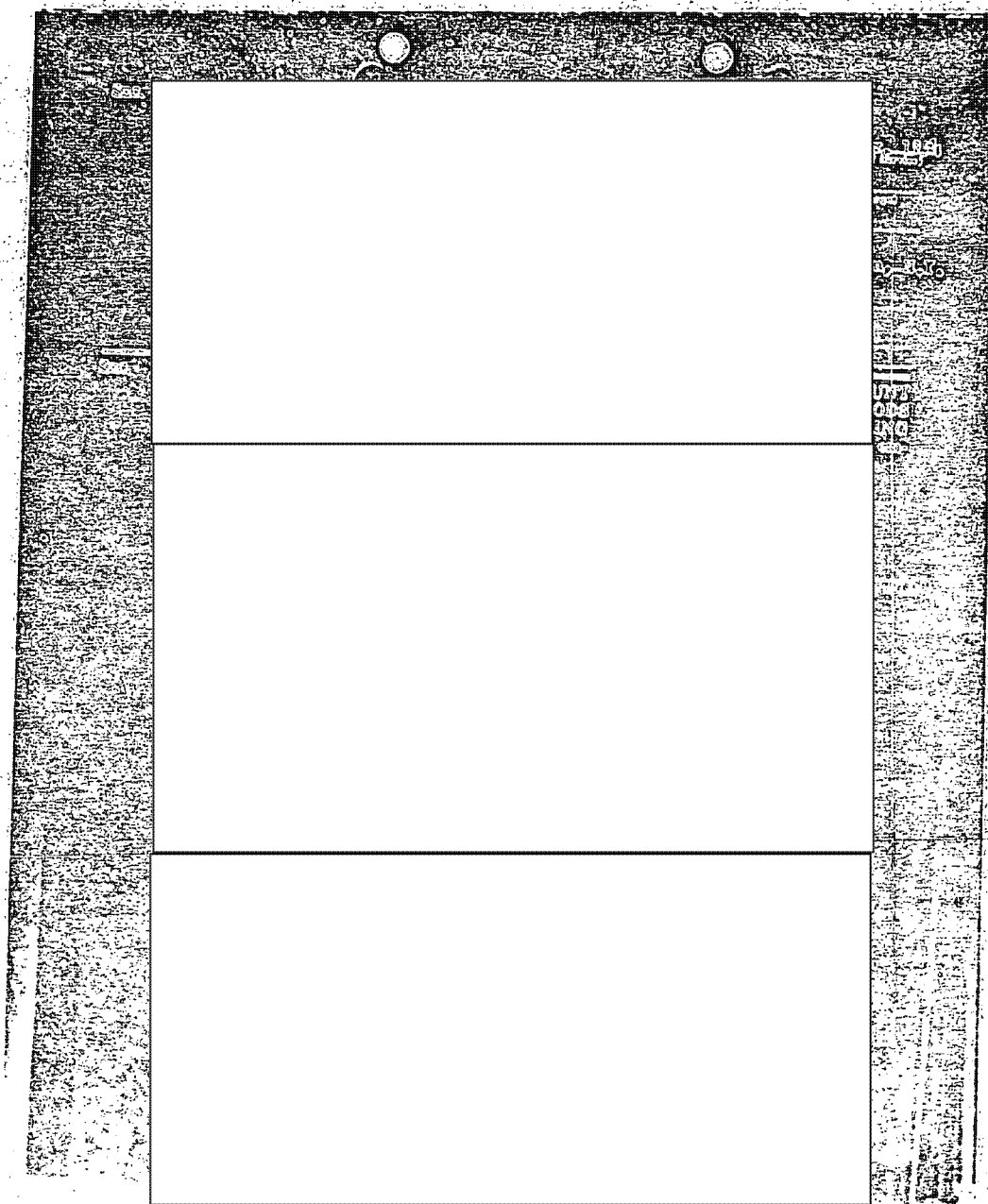
1.1.1.26

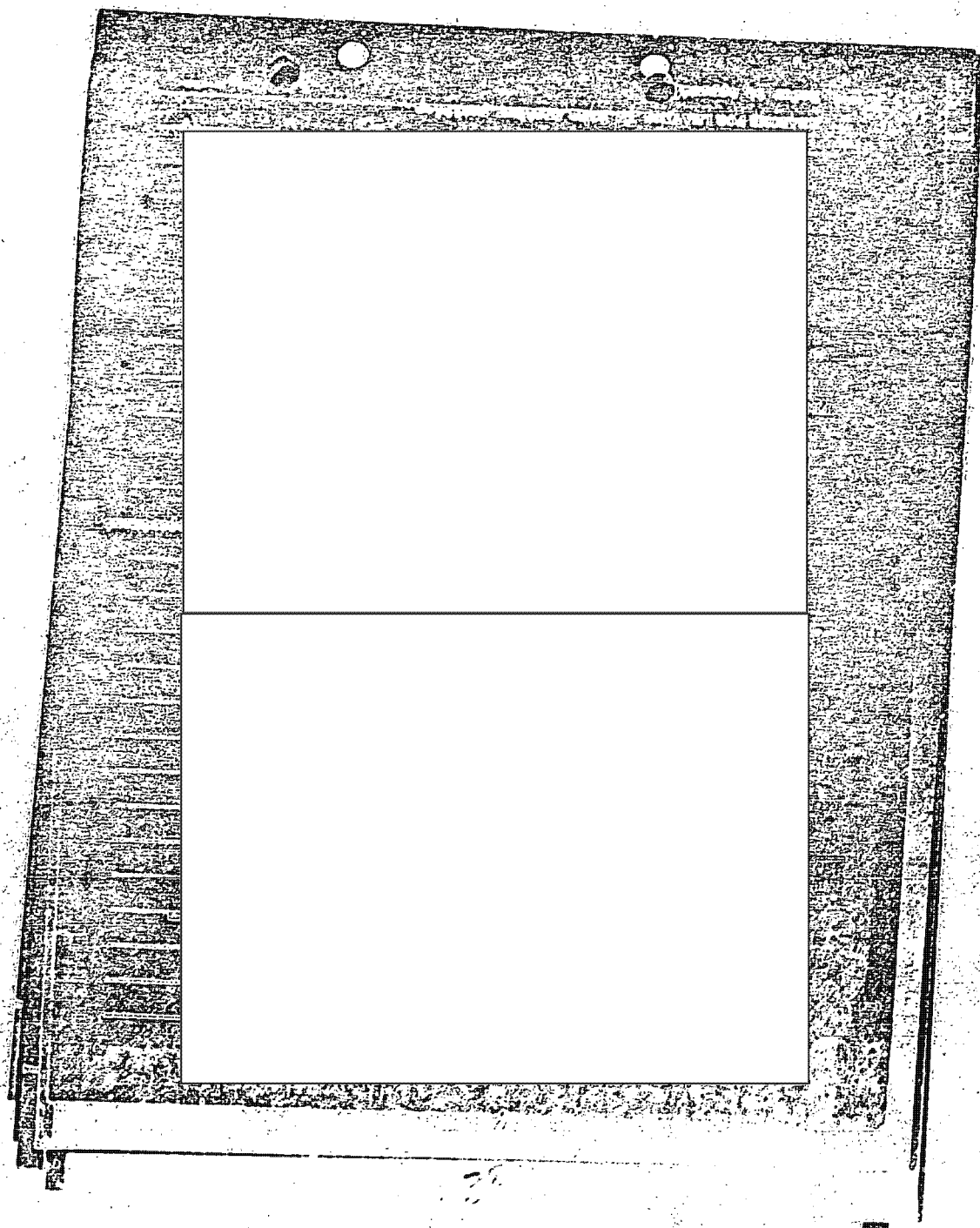
1.1.1.27

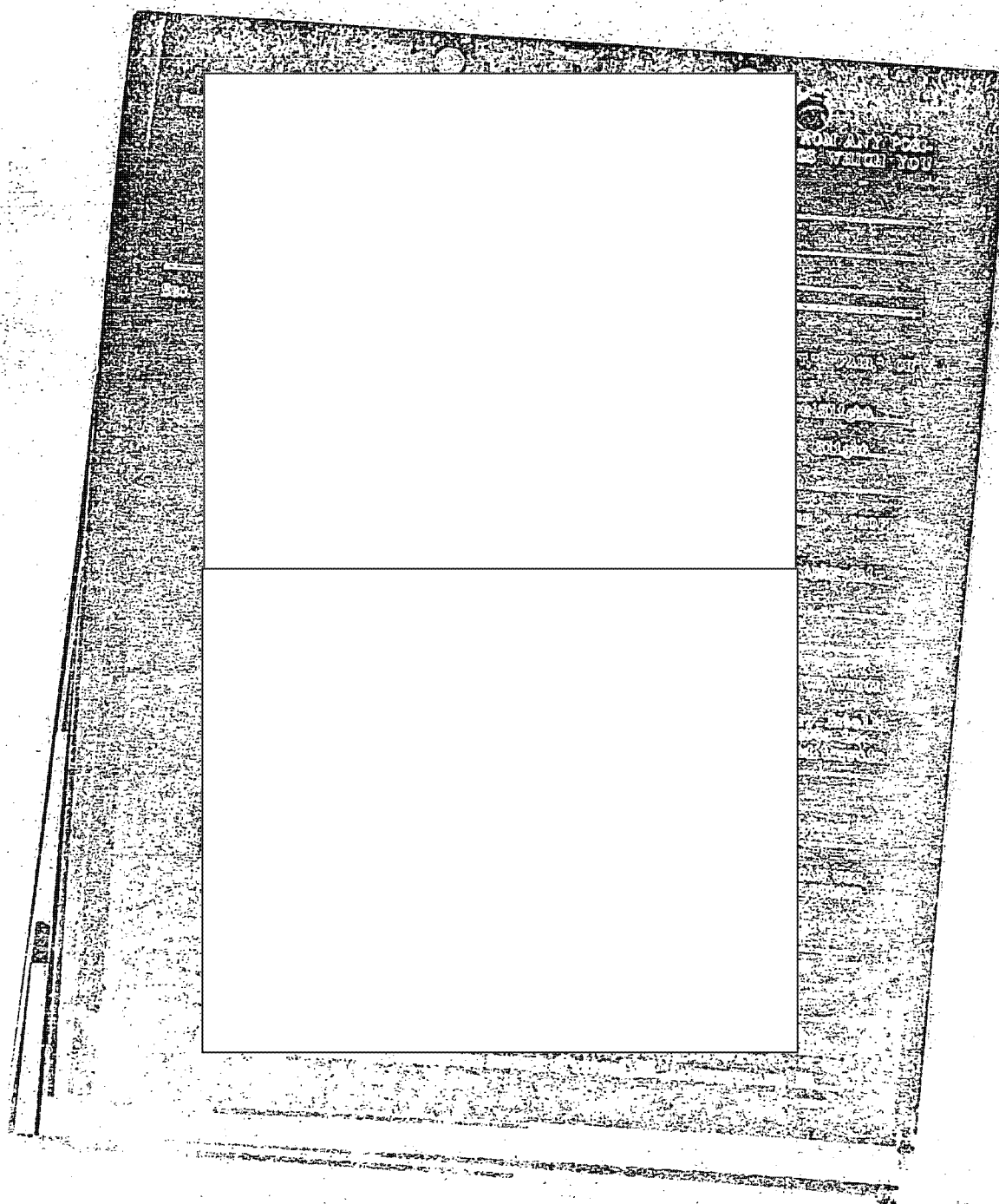
1.1.1.28

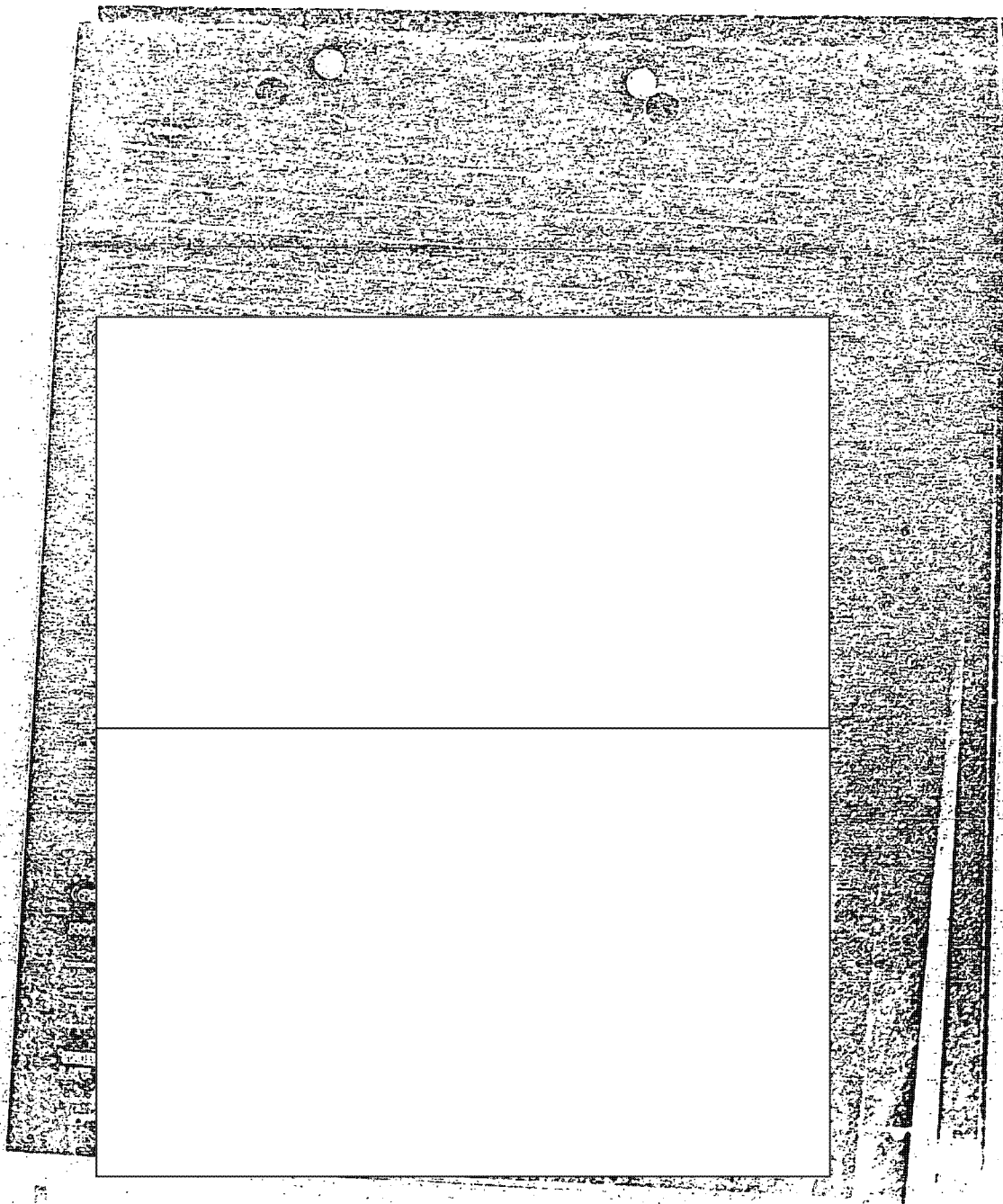
1.1.1.29

1.1.1.30

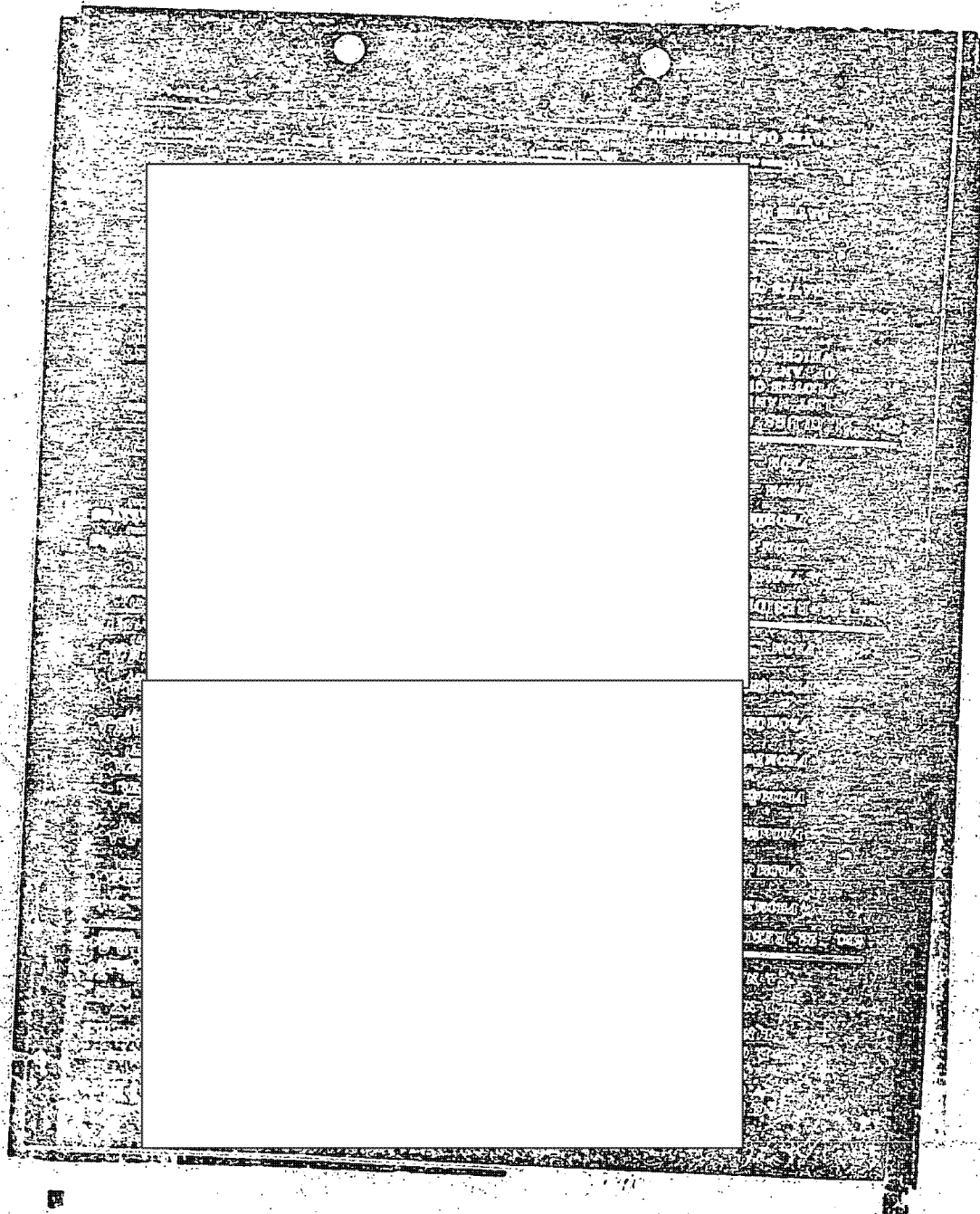


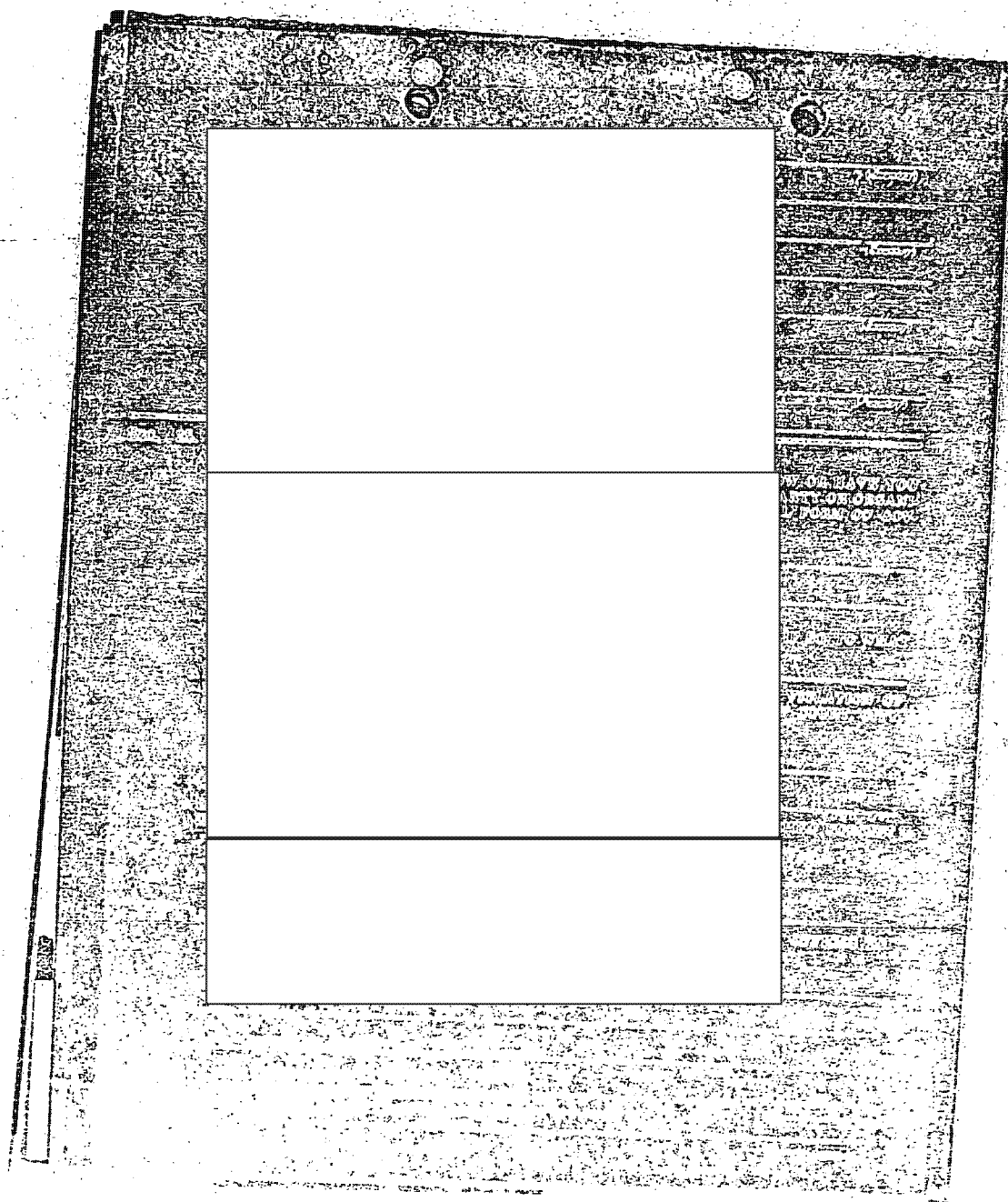


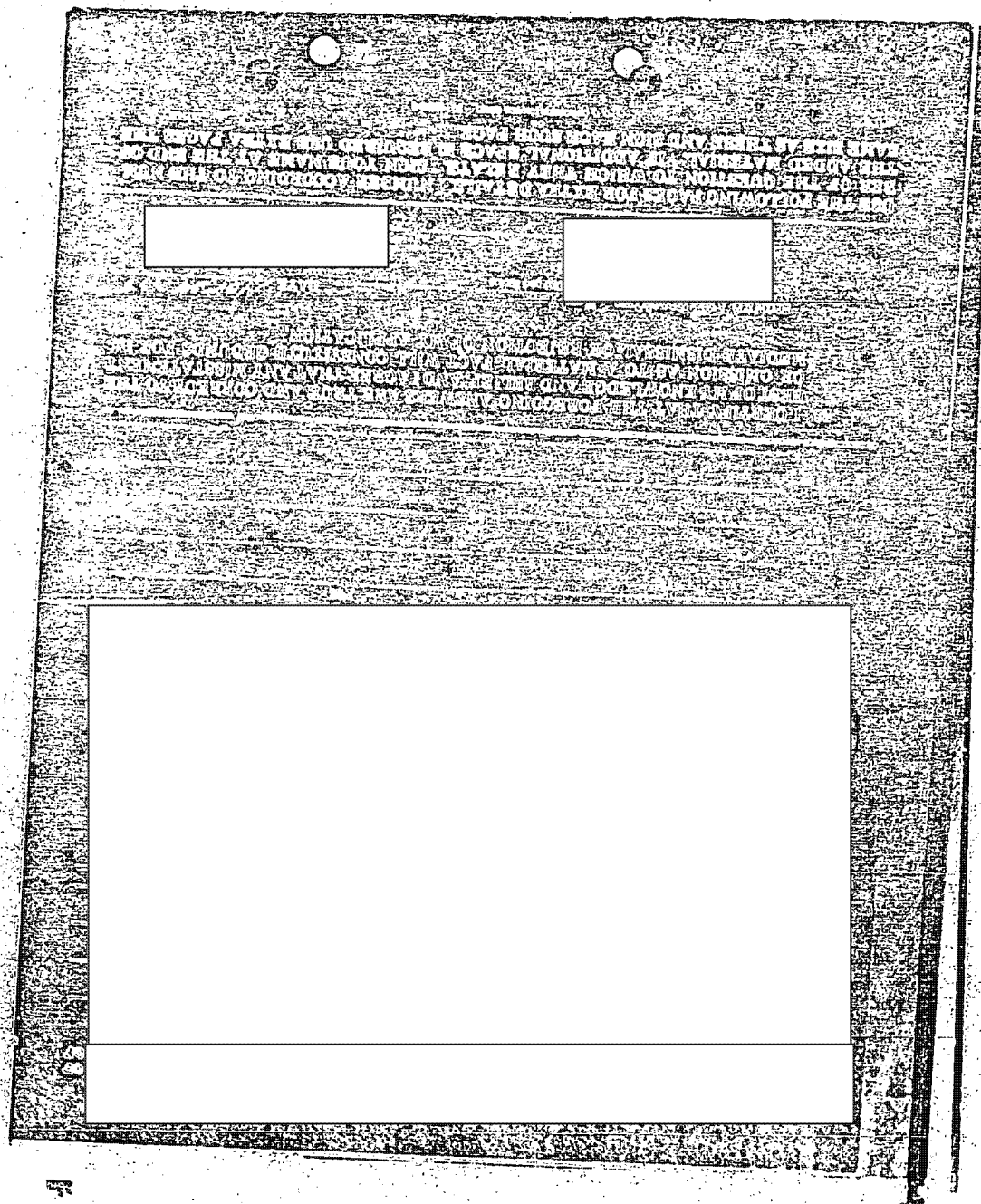


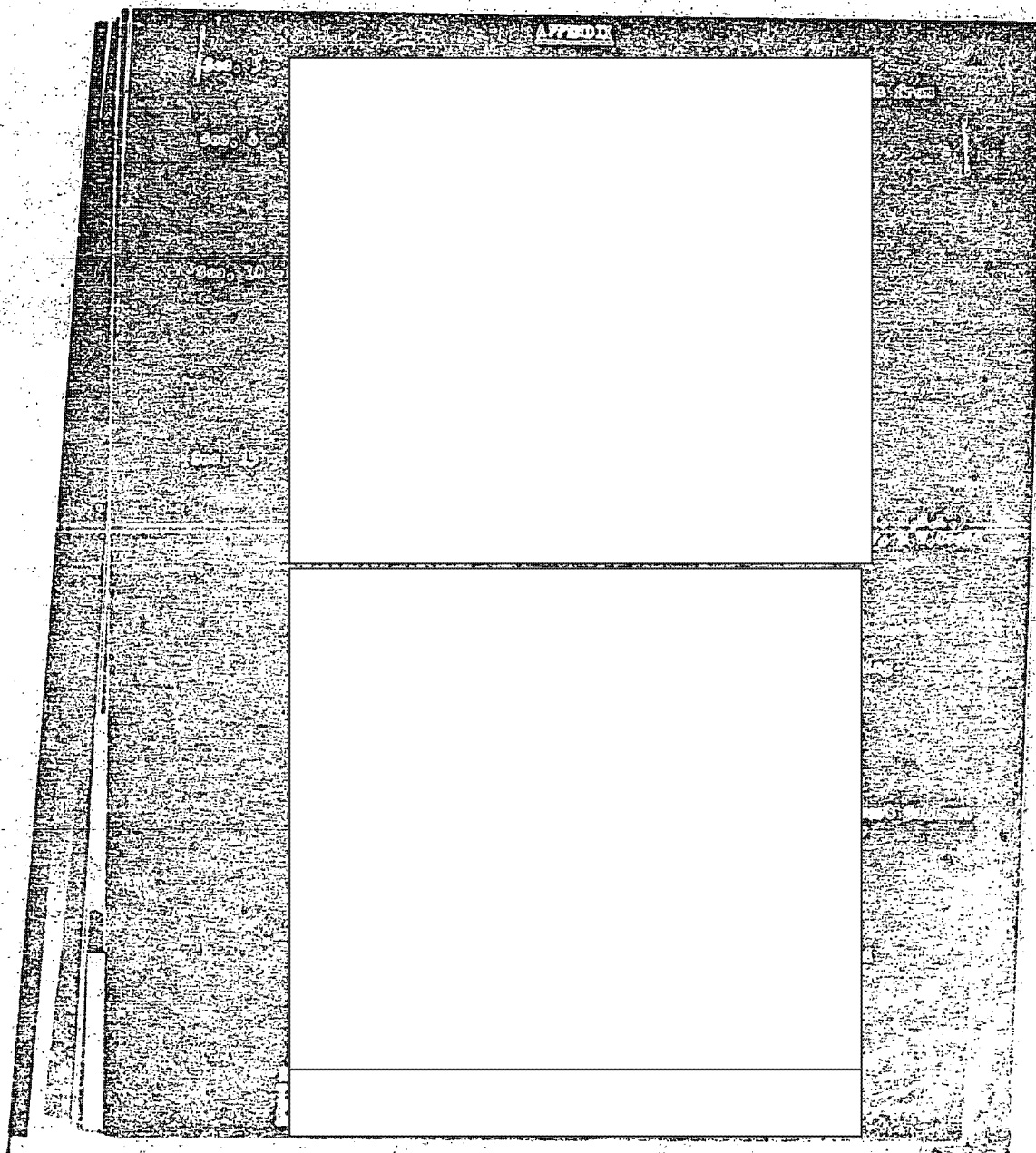


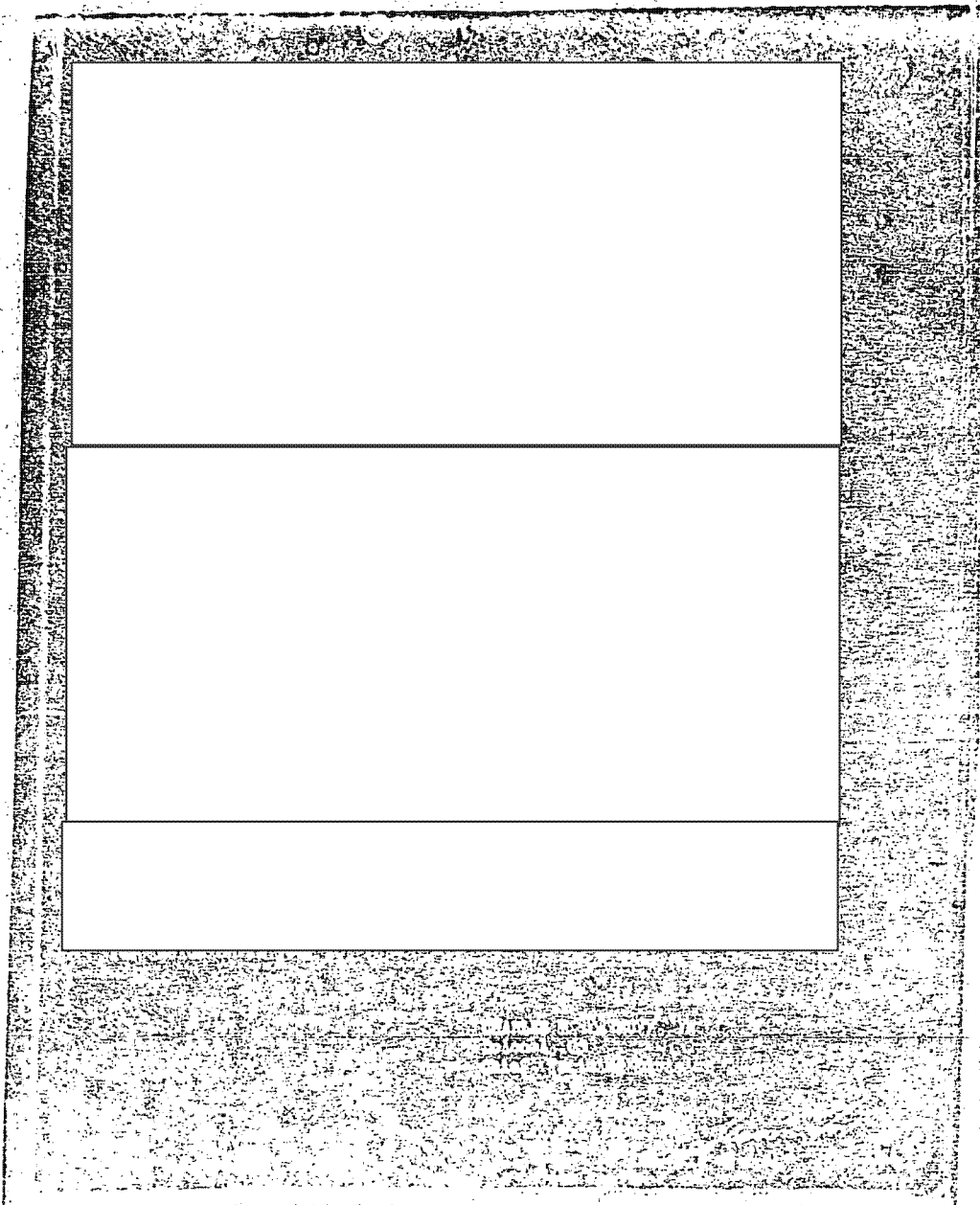
	W. J. QUINN
	1911
	1912
	1913
	1914
	1915
	1916
	1917
	1918
	1919
	1920
	1921
	1922
	1923
	1924
	1925
	1926
	1927
	1928
	1929
	1930
	1931
	1932
	1933
	1934
	1935
	1936
	1937
	1938
	1939
	1940
	1941
	1942
	1943
	1944
	1945
	1946
	1947
	1948
	1949
	1950
	1951
	1952
	1953
	1954
	1955
	1956
	1957
	1958
	1959
	1960
	1961
	1962
	1963
	1964
	1965
	1966
	1967
	1968
	1969
	1970
	1971
	1972
	1973
	1974
	1975
	1976
	1977
	1978
	1979
	1980
	1981
	1982
	1983
	1984
	1985
	1986
	1987
	1988
	1989
	1990
	1991
	1992
	1993
	1994
	1995
	1996
	1997
	1998
	1999
	2000
	2001
	2002
	2003
	2004
	2005
	2006
	2007
	2008
	2009
	2010
	2011
	2012
	2013
	2014
	2015
	2016
	2017
	2018
	2019
	2020
	2021
	2022
	2023
	2024
	2025
	2026
	2027
	2028
	2029
	2030
	2031
	2032
	2033
	2034
	2035
	2036
	2037
	2038
	2039
	2040
	2041
	2042
	2043
	2044
	2045
	2046
	2047
	2048
	2049
	2050
	2051
	2052
	2053
	2054
	2055
	2056
	2057
	2058
	2059
	2060
	2061
	2062
	2063
	2064
	2065
	2066
	2067
	2068
	2069
	2070
	2071
	2072
	2073
	2074
	2075
	2076
	2077
	2078
	2079
	2080
	2081
	2082
	2083
	2084
	2085
	2086
	2087
	2088
	2089
	2090
	2091
	2092
	2093
	2094
	2095
	2096
	2097
	2098
	2099
	2100
	2101
	2102
	2103
	2104
	2105
	2106
	2107
	2108
	2109
	2110
	2111
	2112
	2113
	2114
	2115
	2116
	2117
	2118
	2119
	2120
	2121
	2122
	2123
	2124
	2125
	2126
	2127
	2128
	2129
	2130
	2131
	2132
	2133
	2134
	2135
	2136
	2137
	2138
	2139
	2140
	2141
	2142
	2143
	2144
	2145
	2146
	2147
	2148
	2149
	2150
	2151
	2152
	2153
	2154
	2155
	2156
	2157
	2158
	2159
	2160
	2161
	2162
	2163
	2164
	2165
	2166
	2167
	2168
	2169
	2170
	2171
	2172
	2173
	2174
	2175
	2176
	2177
	2178
	2179
	2180
	2181
	2182
	2183
	2184
	2185
	2186
	2187
	2188
	2189
	2190
	2191
	2192
	2193
	2194
	2195
	2196
	2197
	2198
	2199
	2200
	2201
	2202
	2203
	2204
	2205
	2206
	2207
	2208
	2209
	2210
	2211
	2212
	2213
	2214
	2215
	2216
	2217
	2218
	2219
	2220
	2221
	2222
	2223
	2224
	2225
	2226
	2227
	2228
	2229
	2230
	2231
	2232
	2233
	2234
	2235
	2236
	2237
	2238
	2239
	2240
	2241
	2242
	2243
	2244
	2245
	2246
	2247
	2248
	2249
	2250
	2251
	2252
	2253
	2254
	2255
	2256
	2257
	2258
	2259
	2260
	2261
	2262
	2263
	2264
	2265
	2266
	2267
	2268
	2269
	2270
	2271
	2272
	2273
	2274
	2275
	2276
	2277
	2278
	2279
	2280
	2281
	2282
	2283
	2284
	2285
	2286
	2287
	2288
	2289
	2290
	2291
	2292
	2293
	2294
	2295
	2296
	2297
	2298
	2299
	2300
	2301
	2302
	2303
	2304
	2305
	2306
	2307
	2308
	2309
	2310
	2311
	2312
	2313
	2314
	2315
	2316
	2317
	2318
	2319
	2320
	2321
	2322
	2323
	2324
	2325
	2326
	2327
	2328
	2329
	2330
	2331
	2332
	2333
	2334
	2335
	2336
	2337
	2338
	2339
	2340
	2341
	2342
	2343
	2344
	2345
	2346
	2347
	2348
	2349
	2350
	2351
	2352
	2353
	2354
	2355
	2356
	2357
	2358
	2359
	2360
	2361
	2362
	2363
	2364
	2365
	2366
	2367
	2368
	2369
	2370
	2371
	2372
	2373
	2374
	2375
	2376
	2377
	2378
	2379
	2380
	2381
	2382
	2383
	2384
	2385
	2386
	2387
	2388
	2389
	2390
	2391
	2392
	2393
	2394
	2395
	2396
	2397
	2398
	2399
	2400
	2401
	2402
	2403
	2404
	2405
	2406
	2407
	2408
	2409
	2410
	2411
	2412
	2413
	2414
	2415
	2416
	2417
	2418
	2419
	2420
	2421
	2422
	2423
	2424
	2425
	2426
	2427
	2428
	2429
	2430
	2431
	2432
	2433
	2434
	2435
	2436
	2437
	2438
	2439
	2440
	2441
	2442
	2443
	2444
	2445
	2446
	2447
	2448
	2449
	2450
	2451
	2452
	2453
	2454
	2455
	2456
	2457
	2458
	2459
	2460
	2461
	2462
	2463
	2464
	2465
	2466
	2467
	2468
	2469
	2470
	2471
	2472
	2473
	2474
	2475
	2476
	2477
	2478
	2479
	2480
	2481
	2482
	2483
	2484
	2485
	2486
	2487
	2488
	2489
	2490
	2491
	2492
	2493
	2494
	2495
	2496
	2497
	2498
	2499
	2500
	2501
	2502
	2503
	2504
	2505
	2506
	2507
	2508
	2509
	2510
	2511
	2512
	2513
	2514
	2515
	2516
	2517
	2518
	2519
	2520
	2521
	2522
	2523
	2524
	2525
	2526
	2527
	2528
	2529
	2530
	2531
	2532
	2533
	2534
	2535
	2536
	2537
	2538
	2539
	2540
	2541
	2542
	2543
	2544
	2545
	2546
	2547
	2548
	2549
	2550
	2551
	2552
	2553
	2554
	2555
	2556
	2557
	2558
	2559
	2560
	2561
	2562
	2563
	2564
	2565
	2566
	2567
	2568
	2569
	2570
	2571
	2572
	2573
	2574
	2575
	2576
	2577
	2578
	2579
	2580
	2581
	2582
	2583
	2584
	2585
	2586
	2587
	2588
	2589
	2590
	2591
	2592
	2593
	2594
	2595
	2596
	2597
	2598
	2599
	2600
	2601
	2602
	2603
	2604
	2605
	2606
	2607
	2608
	2609
	2610
	2611
	2612
	2613
	2614
	2615
	2616
	2617
	2618
	2619
	2620
	2621
	2622
	2623
	2624
	2625
	2626
	2627
	2628
	2629
	2630
	2631
	2632
	2633











CONFIDENTIAL
SECURITY INFORMATION
SECURITY APPROVAL

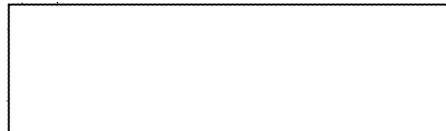
Date: 2 August 1955

TO: Chief, Records & Services Division
Personnel Office
FROM: Chief, Security Division
Personnel
SUBJECT: [REDACTED]

Your Reference: SR-9299-A ORR

Case Number: 102815

1. This is to advise you of security action in the subject case as indicated below:
 - ☒ Security approval is granted the subject person for access to classified information.
 - ☐ Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
 - ☐ The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of paragraph H of Regulation 10-9.
2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
3. Subject is to be polygraphed as part of EOD procedures.



27

Branch advised
8/4/55
[REDACTED]

CONFIDENTIAL

CONFIDENTIAL
SECURITY INFORMATION
INTEROFFICE MEMORANDUM

Date: 27 May 1955

TO: Chief, Processing & Records Division
Personnel Office

FROM: Chief, Security Division
Personnel

SUBJECT: [] - #102815

Request No. SR-9299-A - ORR

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

Ident. Spec. GS-7, DDI/ORR-Office of the Chief, Washington, D. C.

2. This is to advise you of the following security action:

a. ☒ Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity:

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. ☐ Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested Limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. ☐ Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

[]

CONFIDENTIAL